Volunteer Application Never Forgotten Honor Flight

Never Forgotten Honor Flight would not be successful without dedicated help provided by volunteers who assist the NFHF Board of Directors to ensure each deserved Veteran has an unforgettable experience. Assistance is needed for veteran and guardian call nights, Sunday preflight dinners, and Monday flights and spouse luncheons.

Full Legal Name (m	natching photo ID is required for CV	VA concourse) <mark>Dat</mark>	<mark>te of Birth</mark> :	
First:	Middle:	Las ²	t:	
Address:				
City:	State:	Zip code:	Polo Shirt Size:	
Phone: Day	Evening	N	lobile	
E-Mail Address:				
Occupation	Are you	ı a Veteran?	Yes	No
If a Veteran, indica	te your branch of service and wher	າ and where you s	erved	
Why are you volun	teering for the Never Forgotten Ho	nor Flight?		
List any previous v	olunteer experience:			
Areas where volur	nteers are needed: Please place a	check next to are	a(s) you are willing to	assist.
This is not an all-in	oclusive list, but gives a general ide	a of areas we nee	ed help.	
	Call Night (2 per year, usually end Involves calling Veterans and inviti	•		at Marshfield Clinic Weston
	an Call Night (2 per year, usually mi Involves calling Guardians inviting	•		at Marshfield Clinic Weston
	II (4 times per year, usually March, ly members/friends to send mail to		t) Involves calling Vet	's family to spread the word
Sunday	Preflight Dinner Set-up: 10:00 am	until finished		
Sunday	Registration/Hosting 12:00 pm-4:3	30 pm		
Sunday	r Clean-up 4:30 pm-7:30 pm			
Monda	y Airport Send-off 4:00 am until pl	ane takes off		
Monda	y Spouse Lunch 11:00-2:30 pm			
Monda	y Airport Welcome Home 7:00 pm	until Veterans lea	ave CWA	
Special	Projects as needed			

Name: _	Relationship to Applicant	
Phone I	Number: Email Address:	
Emerg	ency Contact:	
Name _	Relationship to Applicant	
Address		
City/Sta	te/Zip code:	
Email A	ddress:	
Phone:		
Please	review carefully and sign: The undersigned acknowledges and agrees that:	
•	Honor Flight trips and events, his/her image may appear in a public forum, such as the media or website acknowledge, promote, or advance the work of the Never Forgotten Honor Flight program. I hereby release photographer and Never Forgotten Honor Flight from all claims and liability relating to said photographs. hereby give permission for my images captured during Never Forgotten Honor Flight activities through viphoto or other media, to be used solely for the purposes of Honor Flight promotional material and public and waive any rights of compensation or ownership there-of. I further state that medical insurance is the responsibility of the volunteer and I understand that neither Forgotten Honor Flight nor the provider of private aircraft (Flight Provider) provides medical care. I understand that I accept all risks associated with travel and other Never Forgotten Honor Flight network activities and not hold Never Forgotten Honor Flight, or the flight provider, or any person appearing or quoted in any advertisement or public service announcement for or on behalf of the Never Forgotten Honor Flight response for any injuries incurred by me while participating in the Never Forgotten Honor Flight program.	ase the I deo, cations, Never rstand d will
SIGNE	D *Date:	
(Email	applicants must sign prior to providing volunteer services.)	
*If und	der 18 a parent or guardian must also sign and date below.	
	Date:	

Parent/Guardian

Please submit this form to: Never Forgotten Honor Flight

Attention: Volunteer Application

225780 Rib Mountain Drive #234

Wausau, WI 54401

Questions: NFHF Message Center: 715-573-8519

Website: neverforgottenhonorflight.com