Volunteer Application for Never Forgotten Honor Flight

Never Forgotten Honor Flight would not be successful without the dedicated help provided by the volunteers. Assistance is required from office management and clerical support to airport assistance that aids the veterans both at the beginning and at the end of each trip.



For further information please contact Never Forgotten Honor Flight at 715 573-8519 or www.neverforgottenhonorflight.org.

Name:					
First	MI La:	st	Date: M_	/D	/Y
Address:					
City:		State: _	Zip Code:		
Phone: Day	Evening _		Mobile		
E-Mail Address:				Age	
Occupation:			Are you a Veteran? _	Yes _	No
T-Shirt Size : S M	L XL X	XL			
Veteran please ind How did you learn a	about the Honor Fligh	nt organization?			
 Why are you volunted Places list any prior 		_			
 Please list any prior There are several v Administrative 	olunteer opportunitie				
Outreach (i.e	. Information booth, s	speaking)			
Special Even	ts (Planning, Fund R	aising)			
Trip Support (If you would	like to be a guardiar	n on the flight pleas	se see separate appli	cation)	

5. Pleas	se list the be	st time for you	to work as a	volunteer.			
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoo	n						
Evening							
6. Pleas	se list two (2)) personal refe	erences.				
1)	Name:						
	E-Mail Add	dress:					
	Relationsh	nip to applican	t:				
2)	Name:						
	Address:						
	City/State/	/Zip:					
	E-Mail Add	dress:					
	Relationsh	nip to applican	t:				
6. Emer	gency Conta	act Information	n:				
	Name:						
	Address:						
	City/State/	/Zip:					
	E-Mail Add	dress:					
	Phone Nur	mber:					
	Relationsh	ip to applican	::				

Please review carefully and sign

The undersigned acknowledges and agrees that:

- 1. As photographic and video equipment are frequently used to memorialize and document Never Forgotten Honor Flight trips and events, his/her image may appear in a public forum, such as the media or website to acknowledge, promote, or advance the work of the Never Forgotten Honor Flight program. I hereby release the photographer and Never Forgotten Honor Flight from all claims and liability relating to said photographs. I hereby give permission for my images captured during Never Forgotten Honor Flight activities through video, photo or other media, to be used solely for the purposes of Honor Flight promotional material and publications, and waive any rights of compensation or ownership there of.
- 2. I further state that medical insurance is the responsibility of the volunteer and I understand that neither Never 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 will 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 responsible for any injuries incurred by me while participating in the Never Forgotten Honor Flight program.

SIGNED *	Date
(E-mail applicants must sign prior to providing volunteer services)	
*If under 18 a parent or guardian must also sign and date below	
Parent or Guardian	Date

Please submit this form to: Never Forgotten Honor Flight

Attention: Volunteer Application

P. O. Box 5056

Wausau, WI 54402-5056

Or e-mail to: info@neverforgottenhonorflight.com