



Veterans Honor Flight of Southern Illinois

VOLUNTEER APPLICATION

Veterans Honor Flight of Southern Illinois Inc., (hereafter "Honor Flight") would not be successful without the generous support, dedication and help 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. Please contact us if you need further information or assistance. *Thank you for your support.*

YOUR FULL NAME: _____ NICK NAME: _____

First Full Middle Name Last (If Applicable)

ADDRESS _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: Day: _____ Evening: _____ Cell Phone: _____

E-MAIL ADDRESS: _____ WEIGHT: _____ DATE OF BIRTH (MM/DD/YYYY): _____

AGE: _____ GENDER: (M, F): _____ TEE SHIRT SIZE: (S, M, L, XL, XXL, XXXL) _____

ARE YOU A VETERAN: YES NO BRANCH OF SERVICE _____

HOW DID YOU HEAR ABOUT HONOR FLIGHT? _____

WHY ARE YOU VOLUNTEERING FOR HONOR FLIGHT? _____

LIST ANY PREVIOUS VOLUNTEER EXPERIENCE: _____

MARK ALL AREAS WHERE YOU WOULD LIKE TO VOLUNTEER (circle all that apply):

In-Office Admin. Asst.	Home Admin. Asst.	Info Booths	Public Speaking	
Event Planning	Fundraising	Contacting Veterans	Flight Check-In	Ground Transport

PLEASE REVIEW CAREFULLY AND SIGN:

The undersigned acknowledges and agrees that:

1. As photographic and video equipment are frequently used to memorialize and document Honor Flight trips and events, his/her image may appear in a public forum, such as the media or a website, to acknowledge, promote or advance the work of the Honor Flight program. I hereby release the photographer and Honor Flight from all claims and liability relating to said photographs. I hereby give permission for my images captured during 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 or compensation or ownership thereto.
2. I understand that I accept all risks associated with travel and other Honor Flight activities and will not hold Honor Flight, the provider of the aircraft, or any person appearing or quoted in any advertisement or public service announcement for or on behalf of Honor Flight responsible for any injuries incurred by me while participating in Honor Flight activities.
3. I authorize Honor Flight officials to release my contact information (home phone and address) to other requesting individuals who participate in the same flight for purposes of communication and camaraderie with other participants.

Volunteer's Signature: _____ Date _____

For volunteers under 18, a parent or guardian must sign below.

Signature: _____ Relationship: _____ Date: _____

Send completed form to Veterans Honor Flight, ATTN: Volunteers, 10400 Terminal Drive, Suite 4, Marion, IL 62959.