



UPPER PENINSULA HONOR FLIGHT GUARDIAN APPLICATION²⁶

The Upper Peninsula Honor Flight Program would not be successful without the generous support of our Guardians. Guardians play a vital role by ensuring that every veteran has a safe and memorable experience visiting their memorial in the City of Washington. Guardians are responsible to physically assist the veterans prior to flight, during the flight and during the visit to the memorials. **Guardians cannot be a spouse or significant other and must be between 18 –65 years of age.** Due to the cost of training and providing all the items necessary for a safe journey, Guardians chosen to participate must have a minimum \$500 donation on record 30 days prior to flight date. Each Guardian is required to attend a mandatory training session to ensure the safety and success of the Mission. The Upper Peninsula Honor Flight is a non-profit 501(c)3 organization and this donation is tax-deductible.

Name: _____
Please print first, MIDDLE, and last as it appears on your ID

Nickname: _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

Phone: Home _____ Cell: _____

Email Address: _____

Occupation: _____ Age: _____ DOB: _____

T-shirt size: S ____ M ____ L ____ XL ____ XXL ____ XXXL ____ XXXXL _____

Are you a Veteran? Yes ____ No ____ HEIGHT _____ WEIGHT# _____

If yes, indicate BRANCH of service, and WHEN and WHERE you served:

How did you learn about the Honor Flight organization?

Why are you interested in volunteering for Upper Peninsula Honor Flight?

Please list any prior volunteer experience:

Please list one personal reference:

Name: _____ Relationship: _____

Phone (Day): _____ Evening: _____ Cell: _____

Address: _____

E-mail address: _____

Please list one emergency contact available on day of travel:

Name: _____ Relationship: _____

Phone (Day): _____ Evening: _____ Cell: _____

Address: _____

Are you requesting to travel with a specific veteran? If yes, Guardian application must be on file before veteran is notified by letter of flight date.

Veteran's name _____

Are you able to lift **50** pounds? Yes _____ No _____

Can you climb a flight of stairs? Yes _____ No _____

Please identify any physical disabilities, restrictions and/or medical conditions that would limit your ability to fulfill the duties of a guardian:

Please list all current medications, dosage and how often taken: (continue on back if needed)

1. _____ 2. _____

3. _____ 4. _____

Any medical experience you might have (CPR, EMT, Paramedic, fireman training, nurse, etc.)

Any additional comments or concerns regarding Upper Peninsula Honor Flight:

You must have a REAL ID

PLEASE REVIEW CAREFULLY AND SIGN

The undersigned acknowledges and agrees that:

1. I hereby give permission for my images captured during Honor Flight activities through video, photo, website or other media to be used solely for the purposes of Honor flight promotional material and publications, and waive my rights of compensation or ownership.
2. I further state that medical insurance is the responsibility of the Guardian and I understand that neither Honor Flight nor the aircraft provider provides medical care. I understand that I accept all risks associated with travel and other Honor Flight Network activities and will not hold Honor Flight, the flight provider or any person/group for any injuries incurred while participating in the Honor Flight Program. We strongly recommend that you discuss this trip with your private physician prior to flight date.
3. I understand that Guardians make a \$500 tax deductible donation to the Honor Flight payable 30 days prior to the flight.
4. I understand that if I am requesting to travel with a specific veteran he must fill out a separate Veteran application and the Guardian application must be on file before the veteran is notified by letter of flight date.
5. I understand that there is a long wait list for Guardians and I will not be contacted until there is an opening.

Signed: _____ Date: _____

Please submit to:
Upper Peninsula Honor Flight
7542 J Rd
Gladstone, MI 49837
Scott 906-280-2871
Kim 906-420-2911

or visit www.uphonorflight.org

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***THANK YOU FOR YOUR GENEROSITY AND SUPPORT OF THIS
WORTHY CAUSE***

WE COULD NOT FLY WITHOUT YOU!!!