



VOLUNTEER APPLICATION



Honor Flight® of West Central Florida, Inc. ("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. Please consider the wide range of opportunities; every little bit helps. For further information, please contact us at info@honorflightwcf.org or call us at 727-498-6079. **Thank you for your support!**

YOUR NAME: _____ SEX: _____
First Middle Last

ADDRESS: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL PHONE: _____

E-MAIL ADDRESS: _____ D.O.B.: _____
**REQUIRED*(MM/DD/YYYY)*

YOUR SHIRT SIZE: Small Medium Large Extra Large (XL) XXL XXXL

OCCUPATION: _____ COMPANY: _____

Are you currently serving or have ever served in the military? Yes No

If YES, please complete the following:

I am: Active Duty WWII Veteran Korean War Veteran
 Vietnam War Veteran Gulf War Veteran Other:

BRANCH OF SERVICE: _____ DATES SERVED: _____

THEATER(S) WHERE YOU SERVED: _____

ACTIVITY DURING YOUR SERVICE: _____

EMERGENCY CONTACT INFORMATION:

NAME: _____ RELATIONSHIP: _____

PHONE: _____ CELL PHONE: _____

NOTE: IF APPLYING TO BE A GUARDIAN, YOU MUST COMPLETE A GUARDIAN APPLICATION!

First, tell us what your strengths are – don't be shy!

STRENGTHS

- Microsoft Excel
- Microsoft Power Point
- Microsoft Word
- Website Design/Maintenance
- Social Media
- Data Entry
- Photography
- Fundraising
- Public Speaking

There are several volunteer opportunities. Please indicate all areas of interest to you:

FUNDRAISING

- Corporate Fundraising
- Fundraisers/Fundraising Event Planning
- Speaking Events

ORIENTATION

- Orientation Table Setup
- Greeters
- Welcome Tables
- Escorts
- Runners
- Shirt/Hat/Tote Distribution
- Registration
- Photographer
- Kitchen
- Transportation Support
- Wheelchair Transportation to Airport

OUTREACH

- Informational Booths
- Speaking Events
- Recruiting Veterans/Guardians
- Mail Call
- Event Planning/Special Events

DEPARTURE

- Greeters
- Escorts
- Shirt/Hat/Tote Distribution
- Mail Call
- Registration
- Security Entrance
- Wheelchair Runners
- Ramp Assistance
- Gate Pass
- Photographer
- Transportation Support

WELCOME HOME

- Veteran Procession Support
- Crowd Control
- Photographer
- Photographer Assistance
- Information Table
- Bouncer
- Donation Collector
- Exit Control
- Transportation Support
- Wheelchair Transport to Shed

PLEASE LIST ONE (1) PERSONAL REFERENCE:

NAME: _____ RELATIONSHIP: _____

EMAIL: _____ PHONE: _____

PLEASE REVIEW CAREFULLY AND SIGN.

The undersigned acknowledges and agrees that:

1. As photographic and video equipment is frequently used to document Honor Flight trips and events, my 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 any photographer/videographer and Honor Flight from all claims and liability relating to said photographs/videos. 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 may be featured on news reports or in photographs or video taken by media or news outlets. I understand I have the right to consent/not consent to an interview with any news outlet. I understand that Honor Flight will NOT provide my name, address, telephone number, or any other personal information to any news or media outlet personnel.

3. I understand that medical insurance is the responsibility of the individual passenger and I understand that Honor Flight does NOT provide medical insurance or travel insurance. I understand that Honor Flight personnel do NOT provide medical care. I understand that I accept all risks associated with travel and other Honor Flight activities and will not hold Honor Flight responsible for any injuries incurred by me while participating in the Honor Flight program.

4. I understand that all information regarding Veterans, Guardians, and Volunteers entrusted to me by Honor Flight personnel is considered confidential and will be safeguarded and not shared with any other person or entity for any purpose other than the intended use by Honor Flight.

SIGNATURE*: _____ **DATE:** _____

PRINT NAME: _____

*If under 18, parent/guardian must also sign & date:

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

PRINT NAME: _____

PLEASE MAIL to:

**Honor Flight of West Central Florida
P.O. Box 55661
St. Petersburg, FL 33732**