

FOR HONOR FLIGHT USE ONLY:

LAST NAME: _____ DATE RECEIVED: ____/____/____



Guardian Application

Honor Flight Southland would not be successful without the generous support of our guardians. Guardians play a significant role on every trip, ensuring that every veteran has a safe and memorable experience. Duties include physically assisting the veteran at the airport, during the flight and at the memorials. Guardians are also responsible for their own expenses (airline fare, etc.). For further information, please contact us at 949.310.6143 or www.honorflightsouthland.org. Thank you for your support.

YOUR NAME: _____ **NICK NAME** _____
(Please list your First, Middle & Last Name as it appears on your driver's license or government ID.) (If Applicable)

ADDRESS: _____ **GENDER:** **M** **F**

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

PHONE: Day: _____ Evening: _____ Cell: _____

EMAIL ADDRESS: _____ **AGE:** _____ **DOB:** _____

OCCUPATION: _____ **ARE YOU A VETERAN?** ____ YES ____ NO

If a veteran, please indicate BRANCH of service, and WHEN and WHERE you served: _____

1. How did you learn about the Honor Flight organization? _____

2. Why are you volunteering for Honor Flight? _____

3. Please list any prior volunteer experience: _____

4. Please list one (1) personal reference:

Name: _____ Relationship to applicant: _____

Address: _____

City/State/Zip: _____

Email Address: _____

Phone Numbers: Day: _____ Evening: _____

5. Please list one (1) emergency contact:

Name: _____ Relationship to applicant: _____

Address: _____

City/State/Zip: _____

Email Address: _____

Phone Numbers: Day: _____ Evening: _____ Cell: _____

PLEASE COMPLETE BACK PAGE

