



## **PLEASE REVIEW CAREFULLY AND SIGN**

Video and still photography will be used to memorialize and document all High Plains Honor Flight activities. To acknowledge and promote the work of Honor Flight, your image may appear in public forums, such as the media or our website. By signing below, you release the photographer and High Plains Honor Flight from any and all claims and liability related to said photographs and videos. Additionally, you hereby give permission for such images of you to be used solely for the purpose of High Plains Honor Flight promotional material and publications, and you waive any rights to compensation and ownership thereto.

Additionally, by signing below, you state that you understand that medical expenses will be your responsibility and that you understand that High Plains Honor Flight does NOT provide medical care. Also, you understand that you accept all risks associated with the travel and other activities related to the trip and that you will not hold High Plains Honor Flight liable for injuries, accidents, or illness sustained while participating in the program.

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**All Forms must be signed and dated before mailing to High Plains Honor Flight**

Mail your application to:

**HIGH PLAINS HONOR FLIGHT  
P.O. BOX 363  
AULT, CO 80610-0363**

See our website:

[www.highplainshonorflight.org](http://www.highplainshonorflight.org)

For questions call:

**(970) 409-4188**



2.

Name			Relationship		
Address				PHONE	Daytime
City	State	Zip	Evening		Cell
Email				Relationship to applicant	

**EMERGENCY CONTACT INFORMATION**

Name			Relationship		
Address				PHONE	Daytime
City	State	Zip	Evening		Cell
Email					