



GUARDIAN APPLICATION

Date Rec'd

High Plains Honor Flight would not be possible without the generous support of our guardians. Guardians play a significant role on every trip, ensuring that every veterans has a safe and memorable experience. Duties include, but are not limited to, physically assisting the veterans at departure, the airport, during the flight, at the hotel, and at the memorials. Guardians are required to make a donation of at least \$1,000. To help defray the cost of their trip. This donation is tax deductible, non-refundable, but only due once a guardian has been selected and agreed to serve on a specific flight. High Plains Honor Flight pays all travel expenses, lodging, and meals. Guardians are responsible for other incidentals.

- Guardians must be at least 21 ■
- Spouses of veterans may not serve as Guardians on the same trip ■
- All prospective Guardians must be within 300 miles of Ault, CO and attend a mandatory Guardian Training session ■

GUARDIAN INFORMATION

| | | | | | |
|---|--|-----------|-----|----------------------|--|
| First Name | Initial | Last Name | | | |
| <i>Name as it appears on your picture ID, for airline travel and security</i> | | | | | |
| Date of Birth | Nickname | | | | |
| Address | City | State | Zip | | |
| Cell Phone | Other Phone | | | | |
| Email | <div>You must have email to be able to receive necessary information</div> | | | | |
| Gender | | | | T-Shirt Size | |
| Male Female | | | | S M L | <i>Note: T-Shirts and jackets are in men's sizes, ladies order accordingly</i> |
| | | | | XL 2XL 3XL | |
| Are you a relative of a Veteran traveling on this Honor Flight? Yes No | | | | | |
| If yes, their name | | | | | |
| Have you been a Guardian on a previous High Plains Honor Flight? Yes No | | | | | |
| If yes, tell us when | | | | | |
| Why are you volunteering to be a Guardian? | | | | | |

EMERGENCY CONTACT INFORMATION

| | |
|--------------------|--------------|
| Name | Relationship |
| Primary Phone/Cell | |
| Address OR Email | |

PERSONAL REFERENCE

| | |
|--------------------|--------------|
| Name | Relationship |
| Primary Phone/Cell | |
| Address OR Email | |

ADDITIONAL GUARDIAN INFORMATION

Experience: list your occupation and any medical or other relevant experience or training that you have (i.e. EMT, CPR, Paramedic, Etc.)

Occupation

Medical Exp.

Other Exp.

Do you have any physical disabilities, and/or medical conditions that would limit your ability to fulfill the duties of a Guardian? Yes No

If yes, describe?

Do you have any drug allergies? Yes No

If yes, list

Are you a veteran? Yes No

If yes, indicate your branch of service, where and when you served

Branch

When

Where

PLEASE REVIEW CAREFULLY AND SIGN

Video and still photography will be used to memorialize and document your trip. 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. 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.

You confirm your understanding of the physical activity required during the trip. This may include helping veterans up and down steps, over obstacles, pushing a veteran in a wheelchair, handling baggage, and other activities that you may be called on to perform

You further understand that your primary responsibility will be the safety and well being of the veterans traveling on the trip. This is not a trip for your own personal sight seeing or visiting with and escorting any specific individual. You will be under the direction of the High Plains Honor Flight officers responsible for the trip. If you are traveling with a specific veteran, you understand and agree that you will also be required to care for and assist all the veterans that you are assigned to.

Honor Flight trips begin and end at locations designated by High Plains Honor Flight, currently in Loveland, CO, and all guardians are required to participate in the entire trip

Guardian's Signature _____

Date

Mail application to:

High Plains Honor Flight
PO Box 363
Ault, CO 80610

Learn more at
www.highplainshonorflight.org
or call
(970) 409-4188