



**Honoring North Carolina's Veterans
Their Courage, Valor and Sacrifice in WW II**
A Community Supported Project of North Carolina's Car and Truck Dealers

APPLICATION FOR VOLUNTEERS

The Triangle Flight of Honor 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 **Sunny Johnson** at 919 524-6561 or **Robert Glaser** at 919-215-8137. **Thank You for your support.**

NOTE: This is not the application form to be a Guardian on the Flight. Please check the website (www.TriangleFlightofhonor.com) for the Guardian Application.

NAME _____ NICK NAME: _____
(Please list your full name: First, Middle, Last) (If Applicable)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: Day _____ Evening _____ Cell _____

E-MAIL ADDRESS: _____ AGE: _____ DOB: _____

OCCUPATION: _____ ARE YOU A VETERAN? ___ Yes ___ No

If a veteran, please indicate BRANCH of service, WHEN and WHERE did you serve.: _____

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

<input type="checkbox"/> Education Outreach	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Administrative Support
<input type="checkbox"/> Contact Veterans	<input type="checkbox"/> Flight Day Send-off	<input type="checkbox"/> Flight Day Return
<input type="checkbox"/> Pre-Flight Meeting Support	<input type="checkbox"/> Speakers Bureau	<input type="checkbox"/> Event Planning

PLEASE COMPLETE PAGE 2

Triangle Flight of Honor
Post Office Box 12167 | Raleigh, NC | 27605-2167
Telephone: (919) 828-4421 Fax: (919) 829-9525 Email: Rglaser@ncada.com
Website: www.triangleflightofhonor.com

5. Please list the best times for you to volunteer.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	_____	_____	_____	_____	_____	_____	_____
Afternoon	_____	_____	_____	_____	_____	_____	_____
Evening	_____	_____	_____	_____	_____	_____	_____

6. Please list one (1) personal reference:

Name: _____ Relationship to applicant: _____
Address: _____ City/State/Zip: _____
E-Mail Address: _____
Phone Numbers: Day _____ Evening _____

7. Please list one (1) emergency contact:

Name: _____ Relationship to applicant _____
Address: _____ City/State/Zip: _____
Phone Numbers: Day _____ Evening _____

PLEASE REVIEW CAREFULLY AND SIGN:

The undersigned acknowledges and agrees that:

1. As photographic and video equipment may be used to memorialize and document the ***Triangle Flight of Honor*** your image may appear in a public forum, such as the media or a website, to acknowledge, promote, or advance the work of the ***Triangle Flight of Honor*** program. I hereby release the photographer and the ***Triangle Flight of Honor*** from all claims and liability relating to said photographs. I hereby give permission for my images captured during the ***Triangle Flight of Honor*** activities through video, photo, or other media, to be used solely for the purposes of ***Triangle Flight of Honor*** promotional material and publications, and waive any rights of compensation or ownership thereto.
2. I further state that medical insurance is the responsibility of the volunteer and I understand that the ***Triangle Flight of Honor*** does **not** provide medical care. I understand that I accept all risks associated with travel and other the ***Triangle Flight of Honor activities*** and will not hold the ***Triangle Flight of Honor*** responsible for any injuries incurred by me while participating in the program.

SIGNATURE: _____ DATE: ___ / ___ / ___

*(E-mail applicants must sign prior to providing volunteer services)

PARENT/GUARDIAN SIGNATURE * If under 18, parent/guardian must also sign and date DATE: ___ / ___ / ___