

**MID-MICHIGAN HONOR FLIGHT**  
**GUARDIAN APPLICATION**

Rev. 2019

DESIGNATED GUARDIAN

GENERAL GUARDIAN

**Veterans Name:** \_\_\_\_\_

The Mid-Michigan Honor Flight Program would not be successful without the generous support of our Guardians. Guardians play a vital role by ensuring that every veteran has a safe and memorable experience visiting their memorial in Washington D.C. Guardians are responsible for physically assisting veterans prior to flight, during the flight and during the visit to the memorials. **Guardians cannot be a spouse and must be between 18 –70 years of age.** Guardians chosen to participate must have a minimum \$500 donation on record prior to flight date. **PLEASE do not send any money with your application.** You will be notified when your Guardian fee is due. Each Guardian is also **required** to attend a mandatory training session to ensure the safety and success of the mission. Guardians must also be able make a 3 day commitment to their Veteran.

**PLEASE PRINT ALL INFORMATION:**

Name: \_\_\_\_\_  
(Please print your **full name**, this includes middle name, as it appears on your photo ID)

Nickname: \_\_\_\_\_ Date of Birth (M/D/YY): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

Email Address (REQUIRED): \_\_\_\_\_

Occupation: \_\_\_\_\_

T-shirt size: S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ XXL \_\_\_ XXXL \_\_\_

Are you a Veteran? Yes \_\_\_ No \_\_\_

If yes, indicate BRANCH of service, years of service and where you served:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medals/Awards/Commendations received:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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How did you learn about the Honor Flight organization?

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Please list one personal reference that we may contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone - Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Please list one emergency contact available on day of travel:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone - Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

**Are you requesting to travel with a specific veteran?** (If yes, Guardian application must be on file before veteran is notified by letter of flight date.)

Veteran's name \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship to Vet (if any): \_\_\_\_\_

Are you able to lift **50** pounds with assistance? Yes \_\_\_\_\_ No \_\_\_\_\_

Please identify any physical disabilities, restrictions and/or medical conditions.

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Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Please list any medical experience you might have (CPR, EMT, Paramedic, Firefighter, Nurse, etc.)

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**PLEASE REVIEW CAREFULLY AND SIGN**

The undersigned acknowledges and agrees that:

1. I hereby give permission for my images captured during Mid-Michigan Honor Flight (MMHF) activities through video, photo, website or other media to be used solely for the purposes of MMHF promotional material and publications, and waive my rights of compensation or ownership.
2. I further state that medical insurance is the responsibility of the Guardian and I understand that neither MMHF, Honor Flight Network (HFN) or the aircraft provider provides medical care. I understand that I accept all risks associated with travel and other MMHF or HFN activities and will not hold them or the flight provider or any person/group for any injuries incurred while participating in a MMHF or HFN Program.
3. I understand that Guardians make a \$500 donation to Mid-Michigan Honor Flight due prior to the flight.
4. I understand that if I am requesting to travel with a specific veteran he/she must fill out a separate Veteran application.
5. I understand that the Board of Directors has final approval of my selection, and that I will be contacted when a seat becomes available on a future flight.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail this form to:**

Mid-Michigan Honor Flight  
5139 Greenacres Dr.  
Frederic, MI 49733

Questions? Call 231-803-4255  
or visit: [www.midmichiganhonorflight.org](http://www.midmichiganhonorflight.org)

You can also scan and email your application to: [info@midmichiganhonorflight.com](mailto:info@midmichiganhonorflight.com)

***THANK YOU FOR VOLUNTEERING AND FINANCIALLY  
SUPPORTING THIS WORTHY CAUSE.  
WE COULD NOT FLY WITHOUT YOU!!!***