



VETERAN APPLICATION (indicate service details below):

Honor Flight Veteran Eligibility Dates: December 7, 1941 – July 31, 1991:

Your Date(s) of Service: _____ **Location(s) Served:** _____

Honor Flight Arizona recognizes American Veterans for your sacrifices and achievements by flying you to Washington, D.C. to see YOUR Memorial at **no cost to you**. Top priority is given to WWII Veterans, Korean War Veterans, & Vietnam War Veterans. In order for **Honor Flight Arizona** to achieve this goal, Guardians fly with the Veterans on every flight providing assistance and helping Veterans have a safe, memorable, and rewarding experience. For what you and your comrades have given to us, please consider this a small token of appreciation from all of us at **Honor Flight Arizona**. For further information, please contact us at 928-377-1020 or visit our website at www.honorflightaz.org.

YOUR NAME _____ **NICKNAME** _____
(Your name as it appears on your license or government ID)

ADDRESS _____ **CITY** _____ **STATE** _____

ZIP _____ **PHONE** _____ **EMAIL ADDRESS** _____

DATE OF BIRTH _____ **AGE** _____ **T-SHIRT SIZE** (circle one) SM MED LG XLG XXLG

Do you use mobility equipment? Y N If yes, please circle: Cane Walker Wheelchair

SERVICE HISTORY

Branch _____ **Dates of Service (From)** _____ **(To)** _____

Military occupation/specialty/duties _____

EMERGENCY CONTACT (son, daughter, etc)

Name _____ **Relationship** _____

Phone _____ **Cell Phone** _____ **Email** _____

SECOND EMERGENCY CONTACT

Name _____ **Relationship** _____

Phone _____ **Cell Phone** _____ **Email** _____

GUARDIAN REQUEST

If you would like to name a specific relative or friend to act as Guardian, please list his/her name & phone number. **Your spouse, lady friend/man friend is NOT eligible to act as a Guardian.** Every effort will be made to accommodate your request. **Guardians are responsible for their own 3-day trip fee** (see Guardian page on www.honorflightaz.org for the current fee amount).

GUARDIAN _____ **RELATIONSHIP** _____ **PHONE** _____

EMAIL _____

YOUR SIGNATURE _____ **DATE** _____

PLEASE SUBMIT FORM TO:

HONOR FLIGHT ARIZONA Attn: K. Friddle, 44808 N. 16th St., New River, AZ 85087