



VOLUNTEER APPLICATION

Southeast Florida Honor Flight could never undertake its mission without the dedicated assistance of our volunteers. Many tasks are required to carry out Honor Flight missions, from clerical support to helping at fundraising events to airport ground support in the morning and evenings on flight days.

Our Volunteer Coordinator, Maureen McNally, can add you to our volunteer corps list so whenever we have any type of notification or request for volunteers, you will be in the loop! You can always email her with any questions: volunteers@honorflightsefl.org.

Please complete the basic information to add you to our volunteer list, and sign the attached acknowledgement below:

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE _____

EMAIL _____

Do you have any special interests for helping? _____

Do you have expertise that could help us:

- | | |
|--|---|
| <input type="checkbox"/> Computer | <input type="checkbox"/> Communication Skills |
| <input type="checkbox"/> Website Designing/Management | <input type="checkbox"/> Media (TV, Newspapers) |
| <input type="checkbox"/> Flip Cause Web Site | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> MS Word | <input type="checkbox"/> Advertising |
| <input type="checkbox"/> Excel | <input type="checkbox"/> Zoom |
| <input type="checkbox"/> Adobe | <input type="checkbox"/> Public Speaking & Presentation |
| <input type="checkbox"/> Google Drive & Applications | <input type="checkbox"/> Airport Support on Flight Days |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Morning |
| <input type="checkbox"/> Event Planning and Organizing | <input type="checkbox"/> Evening (Operation Homecoming) |

Other information: _____

PLEASE REVIEW CAREFULLY AND SIGN:

The undersigned acknowledges and agrees that:

1. As photographic and video equipment are frequently used to memorialize and document Honor Flight trips and events, his/her image may appear in a public forum, such as the media or a website, to acknowledge promote, or advance the work of the Honor Flight program. I hereby release the photographer and Honor Flight from all claims and liability relating to said photographs. I hereby give permission for my images captured during Honor Flight activities through video, photo, or other media, to be used solely for the purposes of Honor Flight 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 Honor Flight does not provide medical care. I understand that I accept all risks associated with travel and other Honor Flight activities and will not hold Honor Flight responsible for any injuries or illness incurred by me while participating in the Honor Flight program.

SIGNATURE: _____ **DATE:** ____/____/____

DATE: ____/____/____

PARENT/GUARDIAN SIGNATURE (If under 18, parent/guardian must also sign and date.)

Please send this form to:

Southeast Florida Honor Flight

Attn: Volunteers

PO Box 1503

Stuart, FL 34995