

FOR HONOR FLIGHT PITTSBURGH USE ONLY: LN _____ DR _____ / _____ / _____
MM DD YYYY



VOLUNTEER APPLICATION

Honor Flight Pittsburgh would not be successful without the generous support of our volunteers. Assistance is required from volunteers in office, clerical and logistical support for trip assistance that aids Veterans both at the beginning and at the end of each trip. Please consider these wide range of opportunities to help recognize and thank our veterans. For further information, please contact us at 833-437-4448. Thank you for your consideration and support.

Your Name: _____
(first) (middle) (last)

Address: _____

City: _____ County: _____ State: _____ Zip: _____

Phone: Day:(_____) _____ Evening:(_____) _____ Cell:(_____) _____

E-Mail Address: _____ DOB: _____

Occupation: _____ Are you a Veteran? ☐ Yes ☐ No

If you are a veteran, please indicate your branch of service and when/where you served:

Why are you volunteering for Honor Flight Pittsburgh? _____

Please list any prior volunteer experience. _____

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

ADMINISTRATIVE SUPPORT

☐ Clerical support from home

OUTREACH

☐ Information Booths

☐ Speaking Engagements

SPECIAL EVENTS

☐ Setup (moving chairs, tables, etc.)

☐ Fundraisers

☐ Contact Veterans

TRIP SUPPORT

☐ Pre-trip backpack packing – Wed PM before trip

☐ Loading and unloading buses – Sat AM and PM

☐ Trip Departure Morning Support – Sat AM

☐ Welcome Home Ceremony Support

OTHER SUPPORT (Describe what support you would like to volunteer for.)

PLEASE COMPLETE BACK PAGE

Please list the best times for you to volunteer.

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

PERSONAL REFERENCES

(1) Name: _____ Relationship: _____

Address: _____

Phone: Day (____) _____ Evening (____) _____ E-Mail: _____

(2) Name: _____ Relationship: _____

Address: _____

Phone: Day (____) _____ Evening (____) _____ E-Mail: _____

EMERGENCY CONTACT

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Day:(____) _____ Evening:(____) _____ Cell:(____) _____

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 Pittsburgh 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 Pittsburgh program. I hereby release the photographer and Honor Flight Pittsburgh from all claims and liability relating to said photographs. I hereby give permission for my images captured during Honor Flight Pittsburgh activities through video, photo, or other media to be used solely for the purposes of Honor Flight Pittsburgh promotional material and publications, and waive any rights or compensation or ownership thereto.
2. I further state that medical insurance is the responsibility of the volunteer and I understand that neither Honor Flight Pittsburgh Inc. nor the provider of bus, or other transportation, provides medical care/coverage. I hereby accept all risks associated with travel and other Honor Flight Pittsburgh activities and will not hold Honor Flight Pittsburgh, its board members, guardians, volunteers, the transportation provider or any person appearing or quoted in any advertisement or public service announcement for or on behalf of Honor Flight Pittsburgh responsible for any injuries incurred by me while participating in the Honor Flight program.

SIGNATURE *:

Date: ____/____/____
MM DD YYYY

*If under 18, a parent/legal guardian must also sign and date below.

SIGNATURE *:

Date: ____/____/____
MM DD YYYY

Please submit this form to: Honor Flight Pittsburgh
Attn Volunteer Application
20436 Route 19, Suite 620-273
Cranberry Township, PA 16066

Or e-mail to: volunteer@honorflightpittsburgh.org