



VIRTUAL REALITY EVENT HOST APPLICATION

Honor Flight Pittsburgh recognizes American Veterans for their sacrifices and achievements while understanding that physical limitations may prevent them from traveling to Washington, DC to see THEIR memorial. All qualified veterans are encouraged to submit their applications now. **Qualified veterans are defined as any veterans that served on active duty sometime during the following timeframe: WWII (12/7/1941 – 12/31/1946), Korean War (6/25/1950- 1/31/1955), and Vietnam War (2/28/1961 – 5/7/1975).** To ensure a safe, memorable, and rewarding experience, Honor Flight Pittsburgh provides guardians to assist the veterans. Please consider this experience as a small token of appreciation from all of us at Honor Flight Pittsburgh for the service you and your comrades have given to your country. For further information, please contact us at 724-355-3737.

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

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

E-Mail Address: _____

Event Location (VFW Lodge, school, nursing home, etc.)

Venue: _____

Address: _____

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

Expected Number of Participants: _____

SERVICE HISTORY of Participants (number): World War II: _____ Korea: _____ Vietnam: _____

ALTERNATE CONTACT

Name: _____

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

E-Mail: _____

Additional Comments or Concerns: _____

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 or compensation or ownership thereto.
2. I further state that medical insurance is the responsibility of the veteran and I understand that neither Honor Flight Pittsburgh, Inc. nor the provider of aircraft or other transportation provides medical care. I hereby accept all risks associated with travel and other Honor Flight activities and will not hold Honor Flight Pittsburgh, Inc., 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, Inc. responsible for any injuries incurred by me while participating in the Honor Flight program.

SIGNATURE:

_____ Date: ____/____/____
MM DD YYYY

Please submit this form to: **Honor Flight Pittsburgh, Inc.**
Attn Veteran Application
PO Box 266
West Sunbury, PA 16061

Or e-mail to: info@honorflightpittsburgh.org