

Coastal Georgia Honor Flight, Inc.

P.O. Box 20466

St. Simons Island, GA 31522

Email: info@coastalgeorgiahonorflight.org

Phone: 912.434.6160 or 615.351.6312

www.coastalgeorgiahonorflight.org



VOLUNTEER APPLICATION - 2018

Coastal Georgia Honor Flight, Inc. would not be successful without the dedicated help provided by the volunteers. Assistance required ranges from clerical support to phone calling to decorations and checking passengers in at the Airport, fund raising, picking up and delivering items here and there and many other functions necessary to a successful *Honor Flight*.

Please print clearly

LAST NAME: _____ FIRST: _____ M.I. _____

ADDRESS: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

PHONE(S): WORK: _____ HOME: _____ MOBILE: _____

MUST HAVE

EMAIL ADDRESS: _____ D.O.B. _____

OCCUPATION: _____ HOW DID YOU HEAR ABOUT HONOR FLIGHT: _____

Please list any other volunteer experience _____

Please circle T-shirt size: S M L XL XXL XXXL

There are many jobs available for Honor Flight. Please check any/all areas of interest to you:

FUND RAISING:

- Calling on businesses (ideal for a salesperson!)
- Hosting/assisting with fund-raising event

OUTREACH EFFORTS:

- Manning T-shirt sales table at events
- Distributing flyers in person
- Soliciting for snack donations & accumulating.
- Making decorations, posters, signs
- Decorating at the Airport (day before flight)

ADMINISTRATIVE SUPPORT:

- Data entry & maintenance (Excell proficient)
- Mailings-- folding, stuffing, labeling, stamping
- Calling family members of veterans to arrange for Mail Call; organizing envelopes.

AT GUARDIAN TRAINING/MEET & GREET EVENT (second or 3rd Saturday in April):

- Assist with check-in
- Greet/direct Guardians and Veterans as they arrive.

DAY OF TRIP SUPPORT 1: ARRIVAL AND BREAKFAST- (at Airport, from as early as 4:30 AM required)

- Assisting with setting up, serving, and cleaning up after breakfast
- Greet/direct Guardians and Veterans as they arrive.

DAY OF TRIP SUPPORT 2: WELCOME HOME CELEBRATION- (at Airport, from about 8:30 PM until after all veterans have returned and left)

- Assist and direct attendees to proper places
- Decoration removal after event (@ 11:00 PM)

BEST DAYS/TIMES FOR YOU TO VOLUNTEER:

If you are generally available/flexible as to days and times, check here: _____

Or if more limited please specify (e.g., not on Tuesdays, etc.) _____

ANY COMMENTS YOU'D LIKE TO MAKE: _____

PLEASE REVIEW THE FOLLOWING CAREFULLY AND SIGN WHERE INDICATED:

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, **Honor Flight**, and **Coastal Georgia Honor Flight, Inc.** 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 volunteer and I understand that neither **Honor Flight** nor Brunswick-Golden Isles Airport provides medical care. I understand that I accept all risks associated **Honor Flight** activities and will not hold **Honor Flight, Coastal Georgia Honor Flight, Inc.**, Brunswick-Golden Isles Airport, veterans, guardians, other volunteers, **Honor Flight** Support Members, or any person appearing or quoted in any advertisement or public service announcement or on behalf of **Honor Flight** responsible for any injuries incurred by me while participating in the **Honor Flight** program.

Signed: _____ Print Name: _____ Date: _____

If under 18 years of age, a parent or legal guardian must also sign and date below:

Signed: _____ Print Name: _____ Date: _____

Relationship to Volunteer: _____ Phone: _____

Please mail this form to:

Coastal Georgia Honor Flight, Inc.

ATTN: Volunteer Application

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