

Capital District Patriot Flight, Inc. Veteran Application

The official hub of the national Honor Flight system for the NY State Capital District serving Albany, Columbia, Saratoga, Schenectady, Warren and Washington Counties

Patriot Flight Use Only: LAST NAME: _____ **Date Received:** _____

Patriot Flight recognizes American Veterans for their sacrifices and achievements in World War II, Korean and Vietnam Wars. To show our appreciation, you will be treated as hero's as we escort you to YOUR war Memorials in Washington, DC including meals, travel, police escorts all at no cost.

Patriot Flight, Inc. and its staff are honored to serve you in this way.

Contact: Sean S Lyons, President lyonssean@ymail.com or

Jennifer Wright, Secretary JWrightcs1@gmail.com

Send applications Via Email above or

Send via US Mail to: Patriot Flight, Inc. PO Box 13776, Albany, NY 12212-3776.

PLEASE COMPLETE ALL SECTIONS HIGHLIGHTED YELLOW

NAME: _____ **BIRTH DATE:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

NOTE: Please provide your NAME and ADDRESS as it APPEARS on your ID (License, Passport, etc.)

Phone: day: _____ **cell phone:** _____

E-mail _____

PLEASE TELL US ABOUT YOUR SERVICE TO THE UNITED STATES OF AMERICA

We HONOR ALL US military Veterans and serve them all in this order - Please indicate your era:

WW II (12/7/41 – 12/31/46), _____ Korean (6/25/50 – 1/31/55) _____

Vietnam ((Cold War)(2/28/61 – 5/7/75)) _____

EVERY VETERAN AND GUARDIAN WILL ALSO RECEIVE A Capital District Patriot Flight POLO

SHIRT FOR THE FLIGHT – please indicate your size **S M L XL XXL XXXL**

Branch of service: _____

Rank or Specialty: _____

Dates in service : **From** _____ **To** _____

Served Primarily _____

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Patriot Flight Use Only: LAST NAME: _____

State your activity during your service: (e.g. Ships names, Plane types, Battles, Medals), and include any human interest stories, hobbies, memorable people or events, livelihood, etc.

Will a Guardian accompany you on the flight? **YES NO** If yes, list that person's, name, relationship, and birth date. **Your Guardian must also complete a Guardian Application.**

Guardian Name: _____ **BIRTH DATE:** _____

Phone: **day** _____ **cell:** _____

email : _____

How did you hear about Patriot Flight Inc? _____

EMERGENCY CONTACT INFORMATION - *Not the Guardian flying with you on flight day.*

Preferably a relative or friend that we can contact in case of an emergency.

Name: _____

Relationship: _____

Address: _____

Phone: **Home** _____ **Cell:** _____

email: _____

We would like some information about you to serve you better. It is for Patriot Flight use only.

Do you use mobility equipment? **Yes No** Circle device used: **cane walker wheelchair scooter.**

Can you walk ¼ of a mile without a wheelchair **Yes__ No__** There is much walking at the Memorials.

Are you Wheelchair bound? **Yes__ No__** If yes, we can provide a bus with a lift to assist you.

Can you, with assistance, walk on and off the bus to a wheelchair? **Yes__ No__**

We will have extra wheelchairs with us in case you may need one later in the day. It would help us if you let us know that you might need one prior to the trip.

Bring your own personal medications list, and needed medications, the day of the flight. Be sure your guardian knows where you keep your med's as well as your emergency contact information..

If you have any health issues, we STRONGLY advise you discuss the trip with your physician.

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Patriot Flight Use Only: LAST NAME: _____

Problems with motion sickness? **Yes**___ **No**___ If yes, is it controlled with meds? **Yes**___ **No**___

*If motion sickness is not controlled with medications, we **STRONGLY** advise you to discuss the flight with your physician*

Do you use oxygen **Yes**___ **No**___?

If yes, we may contact you so we better understand your needs so we can make special arrangements for the flight.

Any additional information or comments you may wish to provide? _____

PLEASE REVIEW CAREFULLY AND SIGN:

I, the undersigned, acknowledge and agree that:

1. Photographs, videos and print media, are frequently used to memorialize and document Patriot Flight trips and events. My image may appear in a public forum, such as the digital or print media, or on a website, to acknowledge, promote or advance the work of the Patriot Flight program. I hereby release the photographer and writers of Patriot Flight articles from all claims and liability relating to any photographs or printed material. I give permission for my images and stories, captured during Patriot Flight activities through video, photo or print media, to be used for promotional purposes. I waive any rights to compensation or ownership thereto.

2. I understand and accept all risks associated with travel and other Patriot Flight activities on the day of the flight, and / or any other Patriot Flight events. I understand that Patriot Flight does not provide medical care. However, there will be medical personnel present to render and assist in more “first aid” type of situations. If the Veteran has a serious health issue, Patriot Flight will require a doctor’s written permission for participation in a Patriot Flight event. I will not hold Patriot Flight responsible for injuries or health conditions that I may incur while participating in the Patriot Flight program. I further acknowledge that medical insurance is the responsibility of the Veteran.

3. Selection and Priority. The selection process gives priority to Veterans of WW II, the Korean War, the Vietnam War and then the Cold War in that order. Patriot Flight has the sole responsibility for selecting Veterans to be on a flight.

NAME PRINTED _____

SIGNED _____ DATE: ____/____/____

PLEASE NOTE: We require a signed form to be on file before making the trip. A final confirmation will be sent to you (email preferred, response required) 4-5 weeks prior to the flight.

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Patriot Flight Use Only: LAST NAME: _____

For answers to any questions or for more information:

Contact:

Sean S Lyons – President

518 391-3448

lyonssean@ymail.com

Jennifer Wright – Secretary

jwrightesl@gmail.com

Scan the application and attach to an e-mail to an address above.

or:

For US mail via US Postal Service,

Please submit this form to:

Patriot Flight, Inc.

PO Box 13776

Albany, NY 12212-3776

For more information about Patriot Flight see our WEB page at

www.patriotflight.org

or on Facebook at

Capital District Patriot Flight