

**MID-MICHIGAN HONOR FLIGHT**  
**FEMALE VETERAN APPLICATION**

**WORLD WAR II**  
(1939-1945)

**KOREAN WAR**  
(1946-1958)

**VIETNAM WAR**  
(1959-1975)

**TERMINALLY ILL**  
(Any Era)

The mission of Mid-Michigan Honor Flight is to transport **World War II, Korean War, Vietnam War** and **Terminally Ill Veterans** from any war, to Washington, D.C. to see their memorials **free of charge**. It is a small way to say thank you to all the brave men and women in Michigan who served our country so selflessly. To help us achieve our goal, Guardians are assigned to accompany Veterans on every flight to provide assistance and to ensure our Honorees have a safe and memorable Tour of Honor.

FULL NAME: \_\_\_\_\_  
(Please print your full name as it appears on your ID)

MAIDEN NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: HOME \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SHIRT SIZE: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_ XXXL \_\_\_\_\_

BRANCH OF SERVICE: \_\_\_\_\_ DATES OF SERVICE: \_\_\_\_\_

DID YOU RETIRE FROM THE SERVICE? Y/N IF YES THE DATE \_\_\_\_\_

RANK AT DISCHARGE: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_

DUTIES DURING SERVICE: \_\_\_\_\_  
\_\_\_\_\_

INTERESTING EXPERIENCES DURING SERVICE: \_\_\_\_\_  
\_\_\_\_\_

MEDALS/AWARDS/COMMENDATIONS RECEIVED: \_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**ALL VETERANS MUST BE ACCOMPANIED BY A GUARDIAN!**

**Are you requesting to travel with a specific Female Veteran Guardian?**

\_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

Your Guardian **MUST be a Veteran** and must have an application on file with MMHF prior to the Veteran being notified of their Honor Flight.

If yes, what is that **Guardian's Name**? \_\_\_\_\_

**Phone:** \_\_\_\_\_

\*Guardians must be between 18-65 years of age, must be a Veteran, and must have a Guardian Application on file with us before you are notified for a flight.

**PLEASE REVIEW CAREFULLY AND SIGN**

The undersigned acknowledges and agrees that:

1. I understand that medical insurance is my responsibility and I understand that neither MMHF nor the aircraft provider provides medical coverage.
2. I have been informed that Mid-Michigan Honor Flight requires that I discuss this trip with my private physician prior to flight date and requires an "approval to fly letter" from the physician.
3. I hereby give permission for my name and photo to be released to other veterans via a flight roster and photo book. Information provided to other veterans will include: name, hometown and branch of service.

\_\_\_\_\_  
Signature of Veteran

\_\_\_\_\_  
Date

**Please mail this form to:**  
Mid-Michigan Honor Flight  
5139 Greenacres Dr  
Frederic, MI 49733

Questions? Call our office at 231-803-4255 or visit our web page [www.midmichiganhonorflight.org](http://www.midmichiganhonorflight.org)