

Please list your current work experience (if retired, please list your most recent work experience):

Organization: _____ Title: _____ Dates (from/to): _____

Primary responsibilities/accomplishments: _____

CONTACT INFORMATION

Primary emergency contact (someone available the day you travel):

Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: Day _____ Evening _____ Cell _____

Email: _____

Non-Spouse alternate contact (son, daughter, grandchild, personal friend):

Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: Day _____ Evening _____ Cell _____

Email: _____

BUDDY & GUARDIAN INFORMATION

If you and a fellow veteran from your service era would like to travel together, please ask him/her to complete a Veteran Application. In addition, please include your buddy's name and number below so that we may try to pair you together on the same flight.

Buddy's name: _____ Buddy's phone: _____

Buddy's email (if applicable): _____

Honor Flight Chicago provides trained Guardians to ensure you have a safe and memorable experience. If you would prefer to have a family member (child, grandchild, niece, nephew, etc., aged 18 - 66) be considered as your Guardian, provide their name below and have them complete a Guardian Application at honorflightchicago.org. Guardians must attend a three hour training class and pay a fee to cover a portion of the day's cost. Completion of the Guardian Application combined with the information below ensures that your request is considered, however selection is not guaranteed. Medically necessary family Guardians are seated first, then all other requests are considered for any available open seats. Your spouse is NOT eligible.

Requested guardian name: _____ Phone: _____

Requested guardian email: _____ Relationship: _____

Additional comments or concerns: _____
