



Mail completed application to:
Rotary Club of Hardee County
 ATTN: Veteran Application, PO Box 1373, Wauchula FL 33873



Name of Rotary Club Presenting this Application:

Guardian Application

Heartland Rotary Freedom Flights would not be successful without the generous support of our guardians. Guardians play a significant role in every trip, ensuring every veteran has a safe and memorable experience. Duties include, but are not limited to, physically assisting the veterans at the airport, during the flight and at the memorials. Guardians are also responsible for their own expenses. For further information, please contact your Rotary Club sponsor/representative or for more information.

Name: <small>(As it appears on your ID for airline travel)</small>	Salutation	First	Middle	Last	Suffix	Nickname
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Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
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Address:						
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City:		State:		ZIP:	
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E-Mail:	
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Day Phone:		Alternative/Cell Phone:	
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Date of Birth: (mm/dd/yyyy)	
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How did you hear about Heartland Rotary Freedom Flights?
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Why are you volunteering for Heartland Rotary Freedom Flights?
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Please list any prior volunteer experience.

Tee Shirt Size:	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> L	<input type="checkbox"/> XL	<input type="checkbox"/> XXL	<input type="checkbox"/> XXXL
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Emergency Contact Information (someone available at home the day you travel)

Name:		Relationship:	
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Address:						
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City:		State:		ZIP:	
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Home Phone:		Work Phone:		Ext:		Cell Phone:	
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Please list one (1) personal reference

Name:		Relationship:	
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Address:						
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City:		State:		ZIP:	
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Home Phone:		Work Phone:		Ext:		Cell Phone:	
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COVID-19 Vaccination Received	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Vaccination currently is not mandatory but recommended. Proof of a negative COVID-19 test may be REQUIRED. Final determination of testing requirement will be made prior to the flight.</i>
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Cost for this flight is \$700.00 which the Guardian will be responsible to pay. Once arrangements are finalized for this flight, the number of Guardians will be established. At that time, Guardian applications will be reviewed, and you will be notified if selected. Additionally, you will be notified of when the fee is due and failure to meet the required fee deadline will automatically disqualify your participation in the program. Application submission is NOT a guarantee you will be selected as a Guardian. Priority for Guardian selection are: Rotarians, family of Rotarians, friends of Rotarians and other eligible volunteers.

PLEASE REVIEW CAREFULLY AND SIGN:

The undersigned acknowledges and agrees that:

1. As photographic and video equipment are frequently used to memorialize and document **Heartland Rotary Freedom Flights** trips and events, I understand images of Veterans and Guardians may appear in a public forum, such as the media or on a website, to acknowledge, promote or advance the work of **Heartland Rotary Freedom Flights**.
2. I hereby release the photographer and **Heartland Rotary Freedom Flights** from all claims and liability relating to said photographs. I hereby give permission for my images captured during **Heartland Rotary Freedom Flights** activities through video, photo, or other media to be used solely for the purposes of **Heartland Rotary Freedom Flights** promotions and publications and waive any rights of compensations or ownership thereto.
3. I further acknowledge that medical insurance is the responsibility of the Veteran and Guardian and I understand that neither **Heartland Rotary Freedom Flights** nor the provider of aircraft ("Flight Provider") provides medical care. I understand that I accept all risks associated with travel and other **Heartland Rotary Freedom Flights** activities and will not hold **Heartland Rotary Freedom Flights**, the Flight Provider, or any person appearing or quoted in any advertisement or public service announcement for or on behalf of **Heartland Rotary Freedom Flights** responsible for any injuries I may incur while participating in the flight program.
- 4.

Signature:		Date (mm/dd/yyyy):	
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