



2025 "Flightless Honor Flight" Veteran Application

To participate in the Flightless Honor Flight Program, please complete the form below so our Ambassadors and Ground Crew can serve all your needs.

You will be sent a letter of confirmation and further information after you are accepted. You and your escort will then receive "Flightless Honor Flight" boarding passes for the virtual tour and program.

You must present the boarding passes on the day of the program for access to the program.

For questions: Call Carole Quackenbush at 513-518-0377

Name (as it appears on your photo ID) _____

Age _____ Phone Number _____ T-shirt size _____

Address _____

City _____ State _____ Zip Code _____

Email address if you have one: _____

Branch of Service _____ Purple Heart Recipient? _____

WW II _____ Korean War _____ Vietnam War _____ Cold War _____ Reserves _____ Other _____

Will you be in a wheelchair? _____ Will you bring a scooter? _____ Can you walk unassisted? _____

ESCORT information

Who will be accompanying you to the Flightless Program? _____

Relationship of the escort to the veteran. _____

My escort's full name _____

Escort's Phone number _____ Escort's Email address _____

Escort's address _____

City _____ State _____ Zip code _____

I understand this program is offered as a courtesy by Honor Flight Tri-State for veterans who are unable to travel on a regular Honor Flight trip. All medical insurance and liability are assumed by the veteran/escort. Honor Flight Tri-State does not provide medical care. I understand and accept responsibility for any illnesses or injuries incurred while participating in the Honor Flight Flightless Program.

Veteran's Signature _____ Date _____

Escort's Signature _____ Date _____

I understand as photographic and video equipment are frequently used to memorialize and document Honor Flight Tri-State trips and events, my image may appear in a public forum, such as the news media or a website, to acknowledge or promote the work of the Honor Flight Tri-State Program. I hereby release the photographer and Honor Flight Tri-State from all claims and liability relating to said photographs. I hereby give my permission for my image captured during the Honor Flight Tri-State Activities through video, photos, or other media, to be used solely for the purposes of Honor Flight Tri-State promotional materials and publications, and waive any rights, compensation, or ownership thereto.

Veteran's Signature _____ Date _____

Escort's Signature _____ Date _____

Please mail the completed form to:

**Honor Flight Tri-State / Attn: Carole Quackenbush
1410 Springfield Pike B-26
Cincinnati, OH 45215**