



FLIGHTS FOR FREEDOM HOLIDAY FLIGHT ASSISTANCE APPLICATION

Applicant Information:

Full Name:	
Rank/Position:	
Branch of Service:	
Years of Service:	
Current Duty Station:	
Home of Record (City/State):	
Email:	
Phone Number:	

Flight Information:

Destination (City/State):	
Have tickets already been purchased?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes- What is the cost of the flight?	
If No – What is the estimated cost of the flight?	\$

Personal Statement:

Please answer the following questions in a separate document and attach it to this application:

1. Why is it important for you to be home with your family during the holidays?
 2. What is your favorite part of being in the military?
 3. Please provide any other details that may help us understand your situation and make our decision.
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Verification:

Please attach a copy of your current military ID or a recent Leave and Earnings Statement (LES) to verify your service status.

Social Media and Website Recognition:

Because we are a nonprofit organization, we rely solely on donations from our sponsors and supporters. Are you okay with being highlighted on our social media and website so that our supporters can see the impact they are making?

Yes No

Agreement:

I certify that the information provided in this application is accurate and complete to the best of my knowledge. I understand that submission of this application does not guarantee flight assistance.

I Agree

Signature: _____

Date: _____