ALL VETS TRIP * November 7, 2024 * <u>Must Be Registered</u>

Udvar Hazy Air & Space Museum in Chantilly, Virginia

Bailey Coach Bus Sponsored by Spring Grove VFW Post 5265 (General Bradley Bus)

Veterans Reserve Your Seats – Buses Fill Quickly

Complete and return the attached Emergency Contact Form & Media Release Form*

Veteran may bring one guest (your guest must also turn in both forms)

Tentative Schedule

Please note that the bus will be leaving from the YORK FAIRGROUNDS, <u>not</u> our VFW.

- **7:00 am** Doors open Horticulture Hall @ York Fairgrounds Coffee, Juice & Donuts available Check-in at our booth for final registration (Spring Grove VFW to board the Gen. Bradley Bus)
- 7:30 am Welcome & Speakers
- 8:00 am Begin loading buses as called / Buses Depart at 8:15 am
- 10:45/11:00 am Arrive at Udvar Hazy Center / Buses Depart at 2:30 pm to return to York
- 5:30 pm Estimated return to York Fairgrounds

Bring with you:

□ The cell phone that you can be reached during the trip, list this phone number on your emergency form. □ A small cooler w/ ice pack (6 pack size) you will receive your bag lunch at check-in. If bringing a guest, they should also bring a small personal cooler. Note: You are welcome to bring your own food/snacks.

* Return forms to VFW Post 5265 by <u>OCTOBER 11, 2024</u> ASAP Buses filling fast!

Place forms in VETERAN mailbox by coat rack at main entrance of VFW 5265 or email tina@vfw5265.org Questions? Contact VFW 5265 - Tina 717-634-1892 (cell) or Bailey Coach - Brenda 717-718-0490 x114 You will receive confirmation of registration

Emergency Contact Form

The information that you provide will be used **only** for November 7, 2024 in the event of an emergency. This form will be destroyed at the end of the day. Please take the time to fill it out fully and accurately.

Personal Information

Last Name	First Name	Middle Initial				
Home Address						
City	State	Zip				
Mobile Phone Nun	nber					
Home Phone Num	ber					
Please check one:	Veteran Guest of veteran					
Branch of Service f	or Veteran					
Special Circumstances, such as health conditions that would need to						
be shared with emergency personnel or accommodations needed.						

Emergency Contact Information

Please list the person that you would like us to contact in the event of an emergency.

Name
Relationship
Address
Mobile Phone Number
Home Phone Number



Release Form for Media Recording/ All Vets Trip

In consideration of my receiving free transportation from York, PA to Steven F. Udvar-Hazy Center in Chantilly, Virginia on November 7, 2024

I, the undersigned, do hereby consent and agree that Bailey Leasing, Inc dba Bailey Coach, Spring Grove High School video-photographers and instructor, and All Vets Trip sponsoring organizations, sponsors, and volunteers or agents have the right to take photographs, videotape, or digital recordings of me beginning on November 7, 2024, and ending on November 7, 2024 and to use these in any and all media, now or hereafter known, and exclusively for the purpose of publicizing the 2024 All Vets Trip. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to Bailey Leasing, Inc dba Bailey Coach, Spring Grove High School videophotographers and instructor, and All Vets Trip sponsoring organizations, sponsors, and volunteers all rights to exhibit this work in print and electronic form publicly or privately. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Name			
Address	 	 	
Phone			

Witness for the undersigned