



FIT TO FLY FORM

FIT TO FLY FORM: Have your DOCTOR complete this form and bring to the preflight meeting if you want to fly to Washington, DC.

NAME: _____ **DATE OF BIRTH:** _____

The individual listed above will travel on an upcoming Villages Honor Flight. Our program honors veterans who have served in previous wars. Currently we are concentrating on veterans from World War II, as well as Korea, and Vietnam. Most of the Veterans are elderly and frequently somewhat handicapped people who we want to make absolutely sure are safe while taking this trip. Veterans, Guardians, and staff will face many strenuous physical demands during this trip. We are asking for your help in identifying any potential problems we should be aware of so we may make this a safe and rewarding trip for the Veterans, Guardians and staff. On a typical flight day the Veteran, Guardian and staff member will:

1. Be awake and very active for close to **24 consecutive hours.**
2. Walk up to a total of **5 miles during the day.** (Veterans will each have their own wheel chair to use and an assigned guardian who will push the wheelchair.)
3. Climb in and out of a motor coach multiple times during the day
4. Travel to and from Washington D.C. by airplane.
5. **Guardians** will also be responsible for all the physical and emotional needs of the Veterans. The Guardian will help load and unload wheel chairs from the Motor Coach. Guardians will push the Veteran in the wheel chair for up to 3 miles sometimes over uneven pavement. The Guardian will assist the Veteran in all of the day's activities including personal needs in the bathrooms.

If you feel this individual is capable of tolerating the above factors, please complete this form.
SINCERELY,

COURTLAND L. MUNROE, M.D., F.A.C.P., Medical Director, Villages Honor Flight

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I have read the above information and discussed it with the applicant and feel that he/she is capable of undergoing the Honor Flight without undue medical risk.

Physician Signature

Date

Physician Stamp

VALID FOR SIX (6) MONTHS.