



WINGS OF VALOR
LODGE

45618 278th St. Parker, SD 57053 Phone: 605-297-4868 www.wingsofvalorlodge.org

Veteran Application

Hunt Weekend: _____

(Example : 03-16-2023 – 03-19-2023)

Full Name: _____ Date: _____

Branch Of Service: _____ Rank: _____

Military Status:

Active: _____ Guard/Reserve _____ Retired _____ Medically RET _____ Other _____

DOD/VA Rating: _____ %

Date of Discharge: _____ Type of Discharge: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Drivers License: _____ State: _____

(Or)

Hunter's ID#: _____ State: _____ Date Issued: _____

Date of Birth: _____

Experienced Hunter? _____ Game Hunted: _____

Caregiver Information

Name: _____ DOB: _____ Relation: _____

Phone: _____ Email: _____

Will Caregiver be attending the hunt? Yes: _____ No: _____

Additional Emergency Contacts (Minimum of two Required)

Name:_____Relation:_____Phone:_____

Name:_____Relation:_____Phone:_____

Name:_____Relation:_____Phone:_____

Please give a brief description of any mobility impairments*. If you do not have any, please list (NONE). _____

*Wings of Valor Lodge is a complete accessible lodge and we will make accommodations where possible to make everyone’s stay enjoyable and without obstructions.

If in a wheelchair, please indicate the type. Manual_____Electric_____

Wheelchair width:_____

If an amputee, please describe amputations:_____

Does the veteran have a service dog? Yes_____No_____

If so, will it be attending the hunt? Yes_____No_____

Will the veteran bring along their weapon? Yes_____No_____

Please note: All weapons will be secured by the lodge at check-in. No exceptions.

Other allergies or needs:

List food allergies and special dietary needs. If none, list NONE_____

Food allergies not already mentioned:_____

Outdoor allergies:_____

Any other special needs not mentioned:_____

Packing List (recommended):

Outdoor jacket and pants

Warming layers (cold weather)

Gloves and boots

Shooting glasses if you have them, prescription glasses if needed

Lodge will provide:

Hunter orange vests, jackets, hats, or beanies

Safety glasses and hearing protection

Hunting license/tags

All towels, washcloths, bedding, etc.

All other items as needed for a safe, comfortable, and enjoyable hunt. We will do our best to make sure the sizes needed are available.

Additional Documentation to attach:

1. DD-214 or DD-215 (redacted) Mark out the first five of Social Security Number
2. Awards and Medals, i.e. Purple Heart, Medal of Honor, Silver Star Medal
3. VA Medical Rating documentation
4. Military photo
5. Present-day photo

Attention:

-Upon arrival, you will be required to relinquish any weapons to the staff at Wings of Valor to be secured in our safe.

-Upon arrival, you will be required to sign the registration and liability release form. You will also be asked to **agree/disagree** to a media and picture release form to be utilized by the lodge to promote our mission to other veterans and to donors and sponsors of the mission.

We look forward to your arrival at Wings of Valor Lodge, inc .

Please call 605-297-4868 with any questions before arrival.
info@wingsofvalorlodge.org

Media release form

Because we are a 501(c)3 non-profit, we may utilize photos and other media from your stay to promote Wings of Valor Lodge, inc to other Veterans and to potential donors. If you do not want us to use your photos/videos or likeness for promotional material, please initial the box below and inform a representative of Wings of Valor Lodge of your desire to not allow the use.

Initial :

_____: **NO, you may not use my photos/videos and/or likeness.**

_____: **YES, Wings of Valor Lodge, inc., may use my photos, videos and/or likeness.**

Release of liability form

The undersigned (**Print name**) _____,
(hereinafter the parties known as (*Guests or Volunteer*) will be referred to as the CUSTOMER,), and his/her/ its family, friends and/or guest and WING'S OF VALOR LODGE, INC., a South Dakota 501(c)(3) non-profit, individually and collectively, and in consideration of the mutual undertaking set forth herein, agree to make these covenants relative to the CUSTOMER'S, use of WING'S OF VALOR LODGE, INC's. property and/or services.

The CUSTOMER, hereby releases and forever discharges WINGS OF VALOR LODGE, INC., It's members, directors, officers, employees, heirs, personal representatives, successors, **vendors or third-party contractors**, and assigns, and all other persons from any and all claims, actions and/or demands that now exist or may hereafter accrue, including all claims, actions and demands whatsoever based on matters now unknown as well as known, and unanticipated as well as anticipated, and any matter whatsoever directly or indirectly resulting from any use of WINGS OF VALOR LODGE, INC's. Property and/or services.

CUSTOMERS, shall hold WING'S OF VALOR LODGE, INC., harmless and indemnity it from any claims or actions brought by any other individual or entity with respect to any claims or actions arising out of any use of WING'S OF VALOR LODGE, INC's property and/or services that were requested by the CUSTOMER, including all attorney's fees, costs and disbursement incurred as a result of such claim or action.

We have each read this release and understand it fully and consent to its terms. We each fully understand that this release is final and binding.

Dated this _____ day of _____, 20_____.

X _____
CUSTOMER, signature

X _____
Legal Guardian signature, if CUSTOMER is under 18 years of age.

Name of minor/juvenile: _____

Date of birth: _____

X _____
WINGS OF VALOR LODGE, INC., Executor (CEO, President, Vice President)
Bruce Weller, CEO, Sean Adams, Pres., Scott Redd, V.P.