



27 SOW Spouse's Day
17 May 2025
Event Sign-Up
Suspense Date: 2 May 2025



Name: _____

Phone Number: _____

Email: _____

Sponsor's Name: _____

Sponsor's Unit/Squadron: _____

Sponsor's Phone Number: _____

Sponsor's email: _____

*Do you require specific morning or afternoon events (for work, childcare, etc.)? Y/N If yes, AM/PM? _____

Do you require childcare? Y/N If yes, AM/PM? _____ Number of children _____ Age(s) _____

1. Aircraft Orientation Flight Y/N _____

Please select 3 aircraft that you want to fly on and prioritize them by placing 1, 2 or 3 in the respective block.

MC-130J Commando II	AC-130J Ghostrider	PC-12
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2. Aircraft Simulator Choices Y/N _____

Please select 3 simulators that you want to fly and prioritize them by placing 1, 2 or 3 in the respective block.

AC-130J Ghostrider	MC-130J Commando II	MQ-9 Reaper	U-28A Draco
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THIS DOCUMENT IS SUBJECT TO THE PRIVACY ACT OF 1974

Contents shall not be disclosed, discussed, or shared with individuals unless they have a direct need-to-know in the performance of their official duties. Deliver this/these document(s) directly to the intended recipient. **DO NOT** drop off with a third-party. The purpose of this information request is to facilitate scheduling of Spouse Flight events only.