

**Valiant Air Command, Inc.**  
**6600 Tico Road**  
**Florida 32780**

Phone: (321) 268-1941 Fax: (321) 268-5969



**Print this form, fill out completely and mail to V.A.C.**

**Retro Flight Flyover Request — Date:        /        /**

Requesting organization/individual: \_\_\_\_\_

Contact phone # \_\_\_\_\_ Contact e-mail: \_\_\_\_\_

Purpose of flyover: \_\_\_\_\_

Location of flyover: \_\_\_\_\_

Landmark discription: \_\_\_\_\_

\_\_\_\_\_

Street Address: \_\_\_\_\_

\_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Nearest airport name: \_\_\_\_\_ Airport identifier: \_\_\_\_\_

Type of formation and number of passes: \_\_\_\_\_

Missing Man formation: \_\_\_\_\_ Multiple passes: \_\_\_\_\_

Other requests: \_\_\_\_\_

\_\_\_\_\_

Direction of approach: \_\_\_\_\_

(Flight direction is generally toward the crowd of people)

Expected time of flyover: \_\_\_\_\_

Is this a "hard" time over target? \_\_\_\_\_ Is ground radio contact needed? \_\_\_\_\_

Name of ground contact person: \_\_\_\_\_

Ground contact cell #: \_\_\_\_\_

Ground contact frequency: \_\_\_\_\_