



DEPARTMENT OF THE NAVY
CHIEF OF NAVAL AIR TRAINING
250 LEXINGTON BLVD SUITE 102
CORPUS CHRISTI TX 78419-5041

CNATRAINST 5357.1B
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30 Jun 2014

CNATRA INSTRUCTION 5357.1B

Subj: NAVY FLIGHT DEMONSTRATION SQUADRON KEY INFLUENCER RIDER PROGRAM

Encl: (1) Example Letter to Solicit Key Influencers
(2) Key Influencer Support Checklist
(3) Medical Questionnaire
(4) Key Influencer Application Letter
(5) Key Influencer Nomination Form
(6) Key Influencer Feedback Form

1. Purpose. To maximize the Navy Flight Demonstration Squadron (Blue Angels) impact on recruiting through the use of backseat rides for Key Influencers. The Blue Angels are an important recruiting tool for the Navy with the ability to generate significant media coverage wherever they perform. By incorporating Key Influencers into the Blue Angels Rider Program, Commander, Navy Recruiting Command (CNRC) and the Blue Angels will maximize exposure to those who influence the decision making process of prospective recruits.

2. Cancellation. CNATRAINST 5357.1A

3. Background. This instruction is intended to specify the role of the Blue Angels in respect to the Rider Program for Key Influencers. Key influencers are defined as the people who help to shape attitudes and opinions of youth in the community. People turn to Key Influencers for advice or information because they have credibility. They may be experts in their field, public figures, leaders of youth organizations, teachers, guidance counselors or school administrators. They are not always the people at the top but have a strong impact on recruiting age youth and/or a specific target audience.

4. Responsibilities

- a. CNATRA has authority over the Key Influencer Program.
- b. The Blue Angels will solicit, review and select Key Influencer riders for all air show sites.

(1) The Blue Angels will solicit nominations for Key Influencer rides for the next show season from all U.S. Navy and Marine Corps Flag Officers, SES employees, show coordinators, and Navy Recruiting Districts (NRD) after the finalized schedule has been released, using enclosures (1) and (2).

(2) The Blue Angels will prepare and send enclosures (3), (4) and (5) to the local NRD and show organizers no later than 150 days, or five months, prior to the show date, re-sending at their discretion. Completed nomination forms, medical questionnaires and application forms must be received at the Blue Angels Events Office by 90 days prior to each show date.

(3) The Blue Angels Events Office will collect the nomination forms and prepare brief biographical information for the Key Influencer selection committee to select qualified applicants within 90 days of each show.

(4) The Key Influencer program will be briefed at the Blue Angels scheduling conference and the International Council of Air Shows convention. The Blue Angels will use input from the associated NRD/MCRD and show site coordinators for additional organization input.

(5) The Blue Angels will hold the Key Influencer selection board between 90 and 60 days before each air show. Selectees will be ranked by priority as a Primary or Alternate Rider. For selection, each applicant must have completed enclosure (3).

(6) Following selection, a list of chosen Key Influencers will be provided to CNATRA Chief of Staff.

(7) Upon approval, each primary and alternate Key Influencer rider selectee will be notified of their selection and the date of their ride.

(8) The Blue Angels will send a list of all Key Influencers and their rankings to the nominating organizations 60 days prior to each air show.

c. During pre-season visits, the Blue Angels Events Coordinator will brief show sites about the Key Influencer Rider Program to inform them of guidance in selecting riders and ensure that the sites provided input to the Blue Angels. Emphasis will be placed on nominations of Community Leaders who have direct access to America's youth.

d. During the 60-90 day time period prior to the Blue Angels arrival at each show site, the Events Coordinator will generate a finalized list of the primary, alternate and Fat Albert rider selections. All six nominations will be contacted at the 60 day prior to show mark by the Blue Angels Events Coordinator to confirm each nomination is willing and able to fly on the specified date.

e. The Blue Angels Flight Surgeon is responsible for final screening of enclosure (3) and flight approval.

f. The Blue Angels are responsible for contacting the approved riders and ensuring each rider has the information needed to get to the air show site, on the correct day and at the correct time. Show coordinators are responsible for generating and coordinating any possible media events associated with the guest riders and the Blue Angels will ensure personalized framed lithographs are sent to the show site prior to any rides.

(1) The Blue Angels will offer any alternate riders who did not fly in the jet an opportunity to fly on Fat Albert during a demonstration. If the offer is accepted, the Blue Angels will ensure the appropriate arrangements are made.

(2) In keeping with the one flight per lifetime policy, a flight in Fat Albert will constitute a rider's ride with the Blue Angels team and they will not be eligible for a future F/A-18 ride.

g. Selectees who must decline a ride in either the jet or Fat Albert will be reevaluated as a Key Influencer prior to being included on any future Key Influencer lists.

h. Following the Key Influencer Ride, each rider will be asked to submit enclosure (6), Key Influencer Feedback Form, to the Blue Angels within 30 days of their flight to learn how the

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rider used, and plans to use, the experience to inform America's youth and public about the U.S. Navy, Marine Corps and Naval Aviation.

S. D. JONES
Chief of Staff

Distribution:
CNATRA Website
Blue Angels

Example Letter to Solicit Key Influencers

INDIVIDUALIZED SALUTATION,

The Blue Angels are an important recruiting tool for the Navy and Marine Corps with the ability to generate significant media coverage wherever they perform. This year we are continuing the effort to fly "Key Influencers" of American youth with the Navy Flight Demonstration Squadron (Blue Angels). The purpose of this program is to maximize the Blue Angels impact on recruiting by flying the right people, who will share this experience, and the Navy - Marine Corps message for years to come.

Key Influencers are defined as people who help to shape attitudes and opinions of youth in their communities. People turn to Key Influencers for advice and information because they have credibility. They may be experts in their field, public figures, leaders of youth organizations, teachers, guidance counselors, coaches, or school administrators. They are not always the person at the top of an organization, but have a strong impact on young people and/or a specific target audience. Good examples of local community Key Influencers include: University presidents, area organizers of youth athletics, Society award winners, School Board members, High school principals, leaders of Diversity groups, and high school/college coaches. Flying these deserving candidates, in cooperation with media presence, should promote the Navy and Marine Corps as a professional and exciting organizations with which to serve.

I need your assistance identifying the Key Influencers around the country. If you know deserving individuals that are good candidates and meet the criteria of a Key Influencer, please complete the attached form for each nominee. Once we have received the nominations, we will select qualified candidates and provide nomination packages to those selected.

We request your nominations by DATE. The nominees will be notified of their potential selection on DATE. Their notification packet will include their RSVP, application form, medical questionnaire and biography request form. Medically qualified riders will be notified of their final selection on DATE, and will be scheduled to fly during the YEAR Air Show season.

Very Respectfully,

Enclosure (1)

APPROVED KEY INFLUENCERS

1. Key Influencer Flights: (Please type or write legibly and be sure to include area code and phone number)

DATE OF MEDIA FLIGHT: _____

SHOW SITE: _____

PRIMARY #1

Age ____ Height ____ Weight ____

Jacket Size ____

Medical History Biography

NAME: _____

PHONE: _____

AFFILIATION: _____

CITY _____ STATE _____

ALTERNATE #1

Age ____ Height ____ Weight ____

Jacket Size ____

Medical History Biography

NAME: _____

PHONE: _____

AFFILIATION: _____

CITY _____ STATE _____

PRIMARY #2

Age ____ Height ____ Weight ____

Jacket Size ____

Medical History Biography

NAME: _____

PHONE: _____

AFFILIATION: _____

CITY _____ STATE _____

ALTERNATE #2

Age ____ Height ____ Weight ____

Jacket Size ____

Medical History Biography

NAME: _____

PHONE: _____

AFFILIATION: _____

CITY _____ STATE _____

PRIMARY #3

Age ____ Height ____ Weight ____

Jacket Size ____

Medical History Biography

NAME: _____

PHONE: _____

AFFILIATION: _____

CITY _____ STATE _____

ALTERNATE #3

Age ____ Height ____ Weight ____

Jacket Size ____

Medical History Biography

NAME: _____

PHONE: _____

AFFILIATION: _____

CITY _____ STATE _____

Commanding Officer, NFDS

DATE

**MEDICAL QUESTIONNAIRE
FOR NON-MILITARY PERSONNEL TO FLY IN
U.S. NAVY BLUE ANGELS AIRCRAFT**

Please Read Carefully

****** EACH PROSPECTIVE RIDER MUST COMPLETE THIS FORM ******

You are requesting to fly as a selected passenger/VIP with the U.S. Navy Blue Angels. Although this squadron has tremendous experience and an outstanding safety record, these flights are still considered high risk and can require a high level of physical fitness and stamina. You will be required to wear a complete set of flight gear including helmet, gloves, flight suit, parachute harness and survival vest. The flight will be conducted in the F/A-18 Hornet, a high performance, ejection seat equipped strike/fighter aircraft. Actual flight profiles may include sustained high G-forces and high speed aerobatic maneuvering. This medical questionnaire allows our flight surgeon to have a better picture of your past and present health, fitness status, and suitability for this type of flight. Please take time and be complete in filling out the form. Be assured that answering yes to a particular question or questions does not necessarily result in disqualification from the flight, as most people have some type of medical history.

You are also required to see your local physician some time prior to the flight for a routine physical examination, at your own expense, to ensure that he or she has no concerns regarding your participation in this type of strenuous activity.

If you have any questions or concerns, please contact the Blue Angels flight surgeon at (850) 452-2067.

DIRECTIONS:

PASSENGER:

1. Immediately schedule an appointment with your physician for a physical exam.
2. During your exam, have the provider review your questionnaire and complete his/her portion of the form.
3. Only exams from Medical Doctors, a D.O., a Nurse Practitioner, or a PA will be accepted. **We cannot accept exams from: chiropractors, podiatrists, optometrists, nurses or holistic healers.**

4. You must fax ALL MEDICAL information, including the questionnaire/doctor's statement below and a copy of your press credentials to (850)-452-2533.

THERE IS NO NEED TO FAX IT TO THE AIRSHOW COORDINATOR.

EXAMING PHYSICIAN

1. Perform a thorough physical exam. It is important that the patient can easily valsalva, and has good TM movements.
2. Please comment on any "YES" answers on the questionnaire, medication use (including OTC), surgeries, retained orthopedic hardware, and any other medical condition. This flight is extremely demanding, and not suitable for everyone.

**IF THIS INFORMATION IS NOT RECEIVED 90 DAYS PRIOR TO YOUR
FLIGHT, YOU WILL BE DISQUALIFIED**

Name _____ Organization _____

Phone Number () _____ Alternate () _____

Showsite _____

Age _____ Height _____ Weight _____ Jacket Size _____

Do you have now, or have you ever had:

- | Y | N | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Disease of the eyes, ears, sinuses or seasonal allergies which still require medication? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Difficulty clearing your ears or pain in your ears or sinuses from flying or scuba diving? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Chest pain, angina, heart attack, heart disease, high blood pressure, heart murmur, palpitations, cardiac catheterization, pacemaker or cardiac stress test? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Stroke, phlebitis, blood clots in legs, excessive fatigue with mild exertion? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Asthma, wheezing, emphysema, chronic cough, tuberculosis, collapsed lung, chest surgery of any kind, chest tube placed, or abnormal chest X-ray? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Disease of the bowel, gastric ulcer, rectal bleeding, chronic abdominal or pelvic pain, hernia, kidney stone, disease of the urinary tract. |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Arthritis, joint deformity, limited movement of any joint, chronic neck or back pain, neck or back surgery, 'slipped' or herniated disk, neurologic surgery of any kind. |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Paralysis, muscle weakness, seizures, epilepsy, loss of consciousness or amnesia. |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Mania, depression, schizophrenia, panic attacks, fear of flying or fear of enclosed spaces? |

Enclosure (3)

- 10. Anemia, sickle cell crisis, diabetes, liver or thyroid disease?
- 11. Arterial gas embolism, decompression sickness or the 'bends'?
- 12. Are you currently pregnant or planning to become pregnant prior to the flight?
- 13. Do you have any acute or chronic condition not listed previously?
- 14. Are you currently under care or therapy of a physician or practitioner for any medical condition?
- 15. Are you currently taking any medications? List:
- 16. Difficulty jogging 2 miles in 20 minutes or swimming 100 yards?

I certify that the above information is true and correct and understand that I am required to have a physical examination by my family physician, at my own expense, prior to flying with the Blue Angels.

Applicant Signature _____ Date _____

IF YOU ANSWERED ' YES' TO ANY OF THE ABOVE QUESTIONS (1-16) PLEASE GIVE DETAILS BELOW AND INDICATE IF THE CONDITION RESOLVED.

The following is to be completed by your examining physician:

The above patient was evaluated on _____.

Enclosure (3)

Date of Exam

Please select one of the following:

_____ He/she has no medical contraindication for flight in a high performance aircraft with the Blue Angels.

_____ He/she has a medical condition(s), which may contraindicate a flight in a high performance aircraft.

Please list and explain all conditions and medications:

Signature of Examiner

Date

**Printed name of Examiner
& Credentials (i.e. MD, DO, PA, NP)**

Phone Number

Approved

Disapproved

Blue Angel Flight Surgeon Signature

Date _____

KI Application Letter

As the Commanding Officer of the Blue Angels, and on behalf of the Commander, Navy Recruiting Command, it is my honor to offer you the opportunity to apply to fly with the U.S. Navy Blue Angels in the F/A-18 Hornet. You have been nominated because Americans turn to you for counsel and career guidance. As a "Key Influencer" of young Americans in your community, it is our hope that your experience in the air and on the ground, with one of the premier naval aviation units, will give you a better appreciation of the teamwork, dedication, and capability the U.S. Navy and Marine Corps provide in the national defense of our country. We know that this experience will be one you will want to share, not just for the day, but for years to come.

The Hornet is a state of the art, high performance strike/fighter aircraft, and as such, certain physical requirements must be met in order to have an enjoyable and safe experience. For this reason, selectees must complete a thorough medical questionnaire for review prior to approval for flight (included in Appendix B). In addition, selectees are required to have a routine physical examination by their local physician prior to the flight to see if there is any reason that they should not participate in this type of strenuous activity. Their doctor will need to review their medical questionnaire, indicate if there are any contraindications to a flight and sign/date the form. This form will then be returned to the Blue Angels Events Office, who can be reached by telephone at 850-452-2067 or via email at michael.h.cheng@navy.mil should you have any questions.

After selection, each of the primary and alternate KI Riders will be notified of the date and location for their flight. Alternates will be selected for each show based on their availability and proximity to a scheduled Air Show to ensure that a qualified KI Rider is on site should the primary selectee be unavailable. All alternates not selected for a ride in the F/A 18 will be afforded the opportunity to fly in "Fat Albert". Fat Albert is a Lockheed-Martin C-130T Hercules aircraft operated by an all-Marine Corps crew of three officers and five enlisted personnel. It is carries more than 40 maintenance and support personnel, their gear and enough spare parts and communication equipment to complete a successful air show.

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After the ride and visit with the Blue Angels, we will provide all selectees with a follow-up questionnaire to learn what you gained from this experience and how you have shared, and will share, your experience with others.

Appendix A of this letter contains the YEAR Blue Angel Air Show Schedule. Please review and select an Air Show site or a time frame and location that fit your schedule. Transportation to and from the flight location, lodging, and meals are your responsibility - the U.S. Navy will take care of the rest.

If you are interested in applying to fly with the Blue Angels, please complete the attached application form and submit it by DATE.

Congratulations again on your nomination. We look forward to having you fly with us.

Sincerely,

Commanding Officer, U.S. Navy

Enclosure (4)

Key Influencer Nominee Form

Key Influencers are defined as people who help to shape attitudes and opinions of youth in their communities. People turn to Key Influencers for advice and information because they have credibility. They may be experts in their field, public figures, leaders of youth organizations, teachers, guidance counselors or school administrators. They are not always the person at the top of an organization, but have a strong impact on recruiting age youth and/or a specific target audience. Good examples of local community Key Influencers include: university presidents, area organizers of youth athletics, society award winners, school board members, high school principals, coaches, and leaders of diversity groups. Flying these deserving candidates, in cooperation with media presence, should promote the Navy and Marine Corps as a professional and exciting organization with which to serve.

KI Nominee Information

Nominee Name: _____

Address: _____

Telephone Number: _____ Birth Date: _____

Email Address: _____

Current Occupation: _____

Please explain briefly why this nominee should be selected as one of this year's Key Influencer Riders:

Has this nominee served in the military? Yes_____ No_____

Does this nominee have any affiliation with the Blue Angels, CNATRA or the Air Show Industry (including sponsorship)?
Yes_____ No_____

If yes, please explain affiliation:

Will this nominee be willing to provide feedback on the KI Rider experience? Yes_____ No_____

Name and Title of person providing the nomination: _____

Signature: _____ Date: _____

Key Influencer Feedback Form

KI Rider Information

Name:

Address:

Telephone Number:

Email Address:

Date of your flight:

Flight location:

Primary Rider_____ **Alternate Rider** _____

Please describe what you learned about the Navy and Naval Aviation from your experience as Key Influencer Rider (the back of this form can be used if additional space is needed):

Please describe how you shared, or plan to share, what you learned with others?

Do you have any suggestions to improve the Key Influencer program? (the back of this form can be used if additional space is needed):

May we contact you for follow-up questions? Yes_____ No _____

Signature: _____ **Date:** _____