Name: _____ Call Sign: _____

Mailing Address: _____

Town: _____ Zip Code: _____

Physical Home Address: _____

Physical Work Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

License Class: _____ If Tech, willing to upgrade: ❑ Yes ❑ No

List working equipment you own. For example: how many handhelds and what models, band coverage; what model mobiles, band coverage, power out, type of antenna; base station setup, what model radios, band coverage, power out, type of antenna. Emergency power, amplifiers, anything else that would be useful and related.

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Do you need help with setting up or operating your equipment and would like someone to help you with it? _____

I am willing to commit to this emergency communication group; this includes actively participating in trainings, the weekly net, and in the event of an actual emergency.

Signed: _____ Date: _____