



## LYON COUNTY ARES/RACES REGISTRATION FORM

Name: \_\_\_\_\_  
                     **First**  **Middle**  **Last**

Nickname: \_\_\_\_\_ Sex: M/F

Call sign: \_\_\_\_\_ License Class: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bus Phone: (\_\_\_\_) \_\_\_\_\_ Home: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_ DOB: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

Indicate the bands and modes that you operate: F – Fixed, M – Mobile, H – Hand held (list all that applies)

Mode	160M	80M	40M	20M	15M	10M	6M	2M	1.4M	70CM	23CM	Other
Voice												
CW												
SSB												
RTTY												
AMTOR												
Packet												

Emergency Generator: Y/N kW: \_\_\_\_\_ Four Wheel Drive: (make & model) \_\_\_\_\_

Portable Antenna: \_\_\_\_\_

List any experience or training related to EMCOMM

Signature: \_\_\_\_\_

Date: \_\_\_\_\_