

## Laramie County ARES/RACES

## ARES REGISTRATION FORM

Name:			
Street Address:			
City:			
State:	_ Zip Code:		
Home Phone: ()			
Cell Phone: ()			
Work Phone: ()			
E-mail Address:			
Call Sign:			
License Class: ( )T ( )TP	()G ()A ()E		
Equipment Information: ( ) 2m HT ( ) 2m Mobile ( ) 2m Base ( ) 20m Mobile ( ) 20m Base	( ) 440 Base ( ) 40m Mobile	( ) 6m Mobile ( ) 6m Base ( ) 80m Mobile	() SSB () CW
Can you cross band frequence	cies? ()Yes()I	No	
Can you monitor 2 or more Fr	equencies? ()	Yes () No	
Can your home station be ope	erated without comme	ercial Power?	( ) Yes ( ) No
Can You Run off the following	: ( ) Alternative Powe	er () Generator	(KW)
OVER			

07/17/05

Affiliation Info	ormation: ( ) RACES			
Training:	( ) Cert Certified	( ) First Aid	() CPR	
	( ) Other			
(Signature o	f Applicant)			(Date)