# 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:** _____

**Driver's License #:**_____ **State:** _____

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

| **Mode** | 160M | 80M | 40M | 20M | 15M | 10M | 6M | 2M | 1.4M | 70CM | 23CM | Other |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Voice-FM** | | | | | | | | | | | | |
| **CW** | | | | | | | | | | | | |
| **SSB** | | | | | | | | | | | | |
| **WinLink** | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| **Packet** | | | | | | | | | | | | |
| | | | | | | | | | | | | |

**Emergency Generator: Y/N kW:**_____ **Four Wheel Drive: (make & model)**_____

**Portable Antenna:** _____

**List any experience or training related to EMCOMM**

**Signature:**_____ **Date:** _____