



GREENE COUNTY OHIO AMATEUR RADIO EMERGENCY SERVICE REGISTRATION FORM

FULL NAME (same as on Drivers License)	NICKNAME	CALL SIGN	CLASS
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STREET ADDRESS

CITY	STATE OHIO	ZIP CODE	COUNTY
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IN WHICH CITY, VILLAGE OR TOWNSHIP DO YOU ACTUALLY RESIDE? MAILING ADDRESSES DO NOT TELL THE WHOLE STORY

HOME PHONE	WORK PHONE (Extension, After-hours number, etc.)
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PAGER	PAGER /CELLPHONE EMAIL ADDRESS	CELL PHONE
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PRIMARY EMAIL ADDRESS	ALTERNATE EMAIL ADDRESS
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MEMBER OF (check all that apply)

[] ARRL [] BARC [] UVARC [] XWARN [] OSSBN [] MVTN [] MARS (AF A NM)
[] CAP [] OTHER:

EQUIPMENT (Brief description of your emergency equipment)

1. HANDHELDS (2m, 70cm, Dualband)

2. MOBILE / PORTABLE STATION (HF, 2m, 70cm, Dualband)

3. PORTABLE DIGITAL STATION (Packet, Other)

CONTINUE EQUIPMENT AND COMMENTS ON OTHER SIDE ...

Select Desired Registration Classification: () ACTIVE () RESERVE

ACTIVE STATUS is for those GCARES members who are committed to regular participation in meetings, training, drills and other on-going activities and who constitute the core group of prepared & ready-to-respond personnel.

RESERVE STATUS is for those GCARES members who are willing to help provide communications support in the event of a disaster or other emergency situation but who prefer not to participate in meetings, training, drills and other activities on a regular basis.

FIRST NAME	LAST NAME	CALL SIGN	PAGE 2
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EQUIPMENT (Additional Information)

4. PORTABLE ANTENNAS, COAX & MAST KITS

5. HOME STATION (Please describe: Bands, Modes, Antennas)

5.A EMERGENCY POWER (Please describe emergency power sources available for your home station--generator, deep cycle or sealed lead acid batteries, etc.)

5.B DO YOU HAVE A TOWER? If so, what is Tower Overall Height above ground?

6. DO YOU MAINTAIN A JUMP KIT/READY KIT/GO-KIT? (Basic radio equipment, clothing, food, water, medical supplies, etc., to sustain an 8, 24 or 72 hour emcomm deployment--See GCARES web page at: <http://gcares.febo.com>)
BASIC DESCRIPTION:

Signature _____