

Application for Public Safety Amateur Radio Group

Name: _____ Call _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Date First Licensed: _____ Current License Class: _____

Current License Expiration Date: _____

Has Your FCC License Ever Been Revoked: _____ ARRL Member _____

e-mail address: _____

Other Capabilities: Emergency Power _____

Portable tower or mast: _____

Type of Membership:

____ Regular \$20.00

____ Family \$10.00 per member after one Regular Member

____ Patron \$20.00

I, the under signed, do hereby to agree to abide by the Public Safety Amateur Radio Group Constitution and By-Laws, the Federal Communication Commission Rules and regulations and support the Public Safety Amateur Radio Group in the advancement of amateur radio and public services.

Signature of Applicant: _____

Date: _____