



Saline County ARES®/RACES® Registration Form



Last Name, First Name:						DOB:									
Callsign:		Class:		N T G A E		ARRL Member:		Y N							
HOME:	Street Address:														
	City:	County:		State:		Zip:									
	Email:						Phone:								
WORK:	Street Address:														
	City:	County:		State:		Zip:									
	Email:						Phone:								
	Work Days/Hours														
BEST Reach: Email:						Phone:									
NIMS/ICS Courses Completed:		100		200		700		800		NWS Spotter Course:		Yes		No	
RADIO EQUIPMENT:	Mobile:	VHF	UHF	Crossband	HF	POWER:		Aux. Battery							
	Portable:	VHF	UHF	Crossband	HF	POWER:		Generator Battery							
	HT:	VHF	UHF	Crossband	HF	OTHER:									
	Base:	VHF	UHF	Crossband	HF	POWER:		Generator Battery							
APRS Capability		HF		VHF		APRSDroid/Ios									
Approx. # pf Public Service Events Worked Annually/ # Years: / Public Service Events Past Year:															
Signature: _____ Date: _____															
This form can be Printed and mailed to:		Saline County ARES/RACES 202 Pope Dr Benton, AR 72015		Contacts:		John Schouten Alan Cate David Wilmot		kg5dnf@arrl.net net1033@att.net kf5toc@arrl.net							

This form may also be filled out, printed, signed, rescanned and emailed to salcoares@gmail.com