



# 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@att.net net1033@att.net kf5toc@arrl.net	

This form may also be filled out, printed, signed, rescanned and emailed to [salcoares@gmail.com](mailto:salcoares@gmail.com)