



AMATEUR RADIO EMERGENCY SERVICE REGISTRATION FORM

Name: _____ Call: _____
 Address: _____
 City: _____ State: IA Zip Code: _____
 Home Phone: _____ License Class: _____
 Other Phone: _____
 Email: _____

160 meters	80 meters	40 meters	20 meters	15 meters	10 meters	6 meters

2 meters	220 MHz	440 MHz	900 MHz	1.2 GHz	APRS	D-Star

Mark capabilities for each band

B-Base
 M-Mobile
 P-Portable

Please check any training you have:

- IS-100 [] EMCOMM LEVEL 1 []
 IS-200 [] EMCOMM LEVEL 2 []
 IS-700 [] EMCOMM LEVEL 3 []
 IS-800 []

Can your home station operate without commercial power? [] Yes [] No
 If Yes, what bands? _____

List any other F.E.M.A. IS courses you have completed:

List any Red Cross Training you have:

List any other training you have:

List any other emergency communications equipment:

List any other equipment:

Please check the area you would like to be notified for:

- Buchanan County ONLY []
 Buchanan and Surrounding Counties ONLY []
 Statewide []

Signed: _____ **Date:** _____

Please return this form to the Buchanan County ARES Emergency Coordinator:
 Eric Grams, N0ZJT