



Amateur Radio Emergency Service®

ARES® Registration Form

Name:	
Call Sign:	
Mailing Address:	
City, State, ZIP code:	
e-mail address(es):	
Home phone number:	
Work phone number:	
Cell phone number:	
License Class:	

Check bands and modes that you can operate:

MODE	HF	6 meters	2 meters	222 MHz	440 MHz	Others
SSB						
CW						
FM						
DATA						
PACKET						
Other modes (specify below)						
Mobile Operation						

Can your home station be operated without commercial power? Yes [] No []

Signature _____ Date _____

Mail or take completed form to
 WCARES
 c/o Mark Lukins
 802 N. Second Ave
 Washington, Iowa 52353