

CCARES Membership Application

CCARES

CLARK COUNTY, WA ARES@/RACES

www.ccareswa.org

*Fields are required.		email completed form to EC@ccareswa.org	
<input type="checkbox"/> *New Application, or an <input type="checkbox"/> Update		*Date:	
Applicant Information			
*Name:			
*Address:			
*City:		*State:	*ZIP:
*Primary Phone:		<input type="checkbox"/> Work	<input type="checkbox"/> Mobile <input type="checkbox"/> Home
Phone #2:		<input type="checkbox"/> Work	<input type="checkbox"/> Mobile <input type="checkbox"/> Home
Phone #3:		<input type="checkbox"/> Work	<input type="checkbox"/> Mobile <input type="checkbox"/> Home
*e-mail:			
Amateur Radio Information			
*Call Sign:			*Expires:
*Year First Licensed:			
*License Class	<input type="checkbox"/> Novice	<input type="checkbox"/> Tech	<input type="checkbox"/> General <input type="checkbox"/> Advanced <input type="checkbox"/> Extra
Certificates and classes *e-mail copies of cards and certificates to EC@ccareswa.org *enter date completed (or expires, as noted)			
CRESA Emergency Worker ID Card #		Expires:	
Intro to EOC			
First Aid Training Card		Expires:	
CPR Training Card		Expires:	
ARC Introduction to Disaster Services			
Introduction to Shelter Operations			
ARRL EC-001 Intro. to Emergency Communications			
EC-016 PS & EmComm Mgt. for Radio Amateurs			
Discontinued ARRL Courses			
<input type="checkbox"/>	EC-001	EC-002	EC-003
FEMA Courses			
<input type="checkbox"/>	IS-100	IS-200	IS-300
<input type="checkbox"/>	IS-400	IS-700	IS-800
DHS COMT		DHS COML	
Other			

CCARES Membership Application

CCARES

CLARK COUNTY, WA ARES@/RACES

www.ccareswa.org

*Equipment Availability				
	Base	Mobile	Portable	HandieTalkie
HF/SSB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VHF (2M)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
220	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UHF (440)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other bands?				
Emergency Power (type and watts):				
CW (wpm):				
Packet: <input type="checkbox"/> 1200 <input type="checkbox"/> 9600 Pactor: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> D-Star				
Winlink 2000 <input type="checkbox"/> Telnet <input type="checkbox"/> Packet VHF <input type="checkbox"/> Packet UHF <input type="checkbox"/> HF				
<input type="checkbox"/> APRS <input type="checkbox"/> Portable Printer				
Other?				
What else do you want us to know?				
Signature				
I understand that all applicants are subject to a background check by Clark County Sheriff's Office.				
*Signature:			*Date:	
email completed form to EC@ccareswa.org				