



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 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| CW | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| FM | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| DATA | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| PACKET | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other modes (specify below) | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Mobile Operation | | | | | | |
| | | | | | | |

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

Signature _____ Date _____

Contact ARES® and ARRL Section Leaders in your area: www.arrl.org/sections
 Learn about ARRL-sponsored Amateur Radio Emergency Communications Courses:
www.arrl.org/online-course-catalog ARRL Member? Yes No