PIMA COUNTY RACES BADGE # _____

Pima County Office of Emergency Management & Homeland Security
RACES Program
3434 E 22nd Street, Tucson, AZ, 85713-2353
Phone: 520.351.3200 Fax: 520.351.3240

☐NEW Application ☐Renewal of Membership

RADIO AMATEUR CIVIL EMERGENCY SERVICE (RACES APPLICATION)

Name: _____ Date of Birth: _____ Amateur Callsign: _____

License Class: ☐**T** ☐**P** ☐**G** ☐**A** ☐**E** Expiration Date: Month: _____ Year: _____

Mailing Address: _____ Physical Address: _____

City: _____

9 Digit Zip Code: _____

Home Phone: _____

Work Phone: _____

Cell/Pager Phone: _____

Email Address: _____

Occupation: _____

Emergency Skills:

☐Antennas ☐Electronic Tech

☐Towers ☐Electrician

☐PC Software ☐Welder

☐PC Hardware ☐Carpenter

☐Packet/Pactor/Winmor ☐EMT/RN/PA/NP/Doctor

☐Other Skills: _____

Station Information:

☐160/80/40m HF Home ☐VHF Mobile

☐80/40m HF Mobile ☐UHF Mobile

☐Dual Band Mobile ☐VHF HT/HH

☐DualBand X-band Repeat ☐UHF HT/HH

☐Packet ☐1200 ☐9600 ☐Pactor ☐Winmor

Vehicle: ☐Car ☐4WD ☐Truck _____

Affiliations:

☐ARES

☐CERT

☐MARS Callsign: _____

☐CAP Callsign: _____

☐Other: _____

☐Drivers License & State: _____

Alternate Power:

☐Battery, AH _____

☐Solar, Amps/Watts _____

☐Generator KW _____

☐_____

Hospital Information (2 Closest Hospitals): ☐Kino/UMC South Campus ☐NWH ☐OVH ☐TMC

☐St. Mary's ☐St. Joseph's ☐UMC ☐VA ☐Other: _____

Operating Preferences: ☐EOC ☐Hospitals ☐TOAD ☐Warrior ☐Home ☐Shadow for field Operations

☐HF ☐VHF/UHF ☐Packet/Pactor/Winmor ☐Work Details

Personal Information: Are you / Have you been / Has your

[Retired: ☐Yes ☐No] [Amateur Radio License ever been Revoked/Suspended or Cancelled? ☐Yes ☐No]

[Denied membership or ask to resign from Amateur Emergency Communications Program? ☐Yes ☐No]

[Convicted of a Felony? ☐Yes ☐No] [Physically and mentally fit to participate? ☐Yes ☐No]

(A conviction record will not necessarily disqualify you from membership. Please use back to include dates and briefly explain any convictions.)

Remarks: _____

I am applying for membership in the Pima County RACES (Radio Amateur Civil Emergency Service) as a volunteer for the Pima County Office of Emergency Management & Homeland Security.

_____ _____

(Applicant's Name (PRINT) and Signature Date rev 2013.1 ctl

PIMA COUNTY RACES BADGE # _____

Special Needs or Restrictions: _____

_____

_____

_____

Remarks: _____

_____

_____

_____

Emergency Notification Contact Information - **PLEASE PRINT LEGIBLY**

NAME: _____

Relationship: (WIFE, HUSBAND, PARENT, SON, DAUGHTER) _____

ADDRESS: _____

PHONE 1: _____ PHONE 2: _____ PHONE 3: _____

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