



Clallam County Amateur Radio Emergency Services

New Member Registration

Last Name:

Given First Name:

Preferred First Name (if different):

Amateur Callsign:

Street Address:

City, State, Zip:

PO Box:

Email Address:

Phone Numbers, Highest Priority First:

Phone #1: Home Cell Work Work-Cell

Phone #2: Home Cell Work Work-Cell

Phone #3: Home Cell Work Work-Cell

Which of the above should be used on the Callout List (Phone Tree)? #1 #2 #3 (circle one)

Emergency Contact (EC) Info:

EC Name: EC Phone #1: EC Phone #2:

OK to print your emergency contact info in the Membership Directory? Yes No

Applicant Initial first page: _____



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Definitions:

Primary: You expect to be available to respond with CCARES during an emergency.

Secondary: Another agency will be your primary commitment during an emergency.

Type of membership desired: Primary Secondary

If Secondary, what is your primary agency?

Note that to become a CCARES Primary or Secondary member in good standing, you must first be accepted as a Volunteer with the Clallam County Sheriff's Office (CCSO). You will need to submit paperwork with them and agree to a background check.

In signing this form below, you are committing to:

- Becoming a CCSO Volunteer.
- Documenting your time by submitting VIMS hours monthly.
- Completing the 4 required ICS trainings ASAP, 6 months maximum.
- Joining the CCARES mailing list and receiving individual emails.
- CCARES participation (as detailed in the CCARES Task Book and the CCARES Operations Manual), including:
 - Regular meeting attendance (Online or in person)
 - Regular participation in on-air nets
 - Participation in exercises
 - Participation in events

Applicant Signature: _____ Date Signed: _____

Mail this form to Bruce Reiter (New-Member Coordinator) at PO Box 1103, Port Angeles 98362, or scan and send as an image or PDF to Bruce at brewkatrit546@gmail.com.