Application for membership in the **Traverse Bay Amateur Radio Emergency Communications Group.**

Hereafter referred to a TBARECG

|  |  |
| --- | --- |
| Name |  |
| Call Sign |  |
| Class of license |  |
| Home and cell phone numbers: |  |
| Email Address |  |

Have you completed any of the following training courses?

|  |  |  |
| --- | --- | --- |
| Class completed | Yes | No |
| FEMA IS 22 \* |  |  |
| FEMA IS 100\*\* |  |  |
| FEMA IS 200 |  |  |
| FEMA IS 700\*\* |  |  |
| FEMA IS 800 |  |  |
| SKYWARN |  |  |
| ARRL Field Resource Manual |  |  |

“\*” - Recommended for ARES

“\*\*” – Required within 2 years for RACES

Note: The Grand Traverse Emergency Management Director **MAY**  make a background check on members in certain situations.

Note: There are three level of membership in TBARECG. Membership is based on level of training and approval of the Board of Directors and the Grand Traverse Emergency Management Director. The membership level are General, ARES and RACES as outlined in the Bylaws of TBARECG.

I hereby apply for membership in the Traverse Bay Amateur Radio Emergency Communications Group.

|  |  |  |
| --- | --- | --- |
| Name | Signature | Date |