OFFICE OF EMERGENCY SERVICES
222 EAST WEBER AVENUE
Room 610 Courthouse
STOCKTON, CALIFORNIA 95202
Telephone (209)468-3962

COUNTY OF SAN JOAQUIN
R.A.C.E.S.
Volunteer Registration

RADIO AMATEUR CIVIL EMERGENCY SERVICES

PLEASE PRINT

Mr. [ ] **LAST NAME** **FIRST NAME** **M I** **SOCAL SECURITY #**
Mrs. [ ]
Miss [ ]

FCC CALLSIGN

DRIVER LIC. #

FCC CLASS
[ ] Technician
[ ] General
[ ] Advanced
[ ] Extra

TYPE OF EQUIPMENT
[ ] HF mobile
[ ] HF base
[ ] packet BASE
[ ] portable packet
[ ] 440 portable
[ ] 2-Meter port.
[ ] 2-meter base
[ ] 2-meter mobile
[ ] ATV
[ ] 440 base

RESIDENCE STREET ADDRESS **CITY** **ZIP** **TELEPHONE #**

EMPLOYED BY **STREET ADDRESS** **CITY** **TELEPHONE #**

DATE OF BIRTH **HEIGHT** **WEIGHT** **HAIR COLOR** **EYE COLOR**

MEMBER OF(other emergency organizations)

ANY CRIMINAL RECORD (explain)

SPECIAL EQUIPMENT

[ ] generator
[ ] 4-wheel drive
[ ] boat _____
[ ] motorcycle
[ ] other _____
[ ] other _____

SPECIAL SKILLS

[ ] first-aid
[ ] photography
[ ] other _____
[ ] other _____
[ ] other _____
[ ] other _____

AVALIABILITY

[ ] weekdays [ ] weeknights [ ] weekends [ ] anytime

Signature _____ DATE _____/____/_____
month day year

SJC FORM 60 (9/94)