

- Over for Side 2: Additional Family Members at the same residence -

***** Side 2: Additional Family Members at the same residence *****

First Name: _____ MI: ____ Last Name: _____

Callsign: _____

Gender: Male Female Occupation (optional) _____

Address: same as Primary person on Side 1

Home Phone: _____ Work (optional) : _____

Cell Phone: _____ Cell Carrier: _____

May the Club text you re: Nets _____ Meetings _____ Incident Callout _____

Email: _____

Permission to include in the Club directory, including online (circle one): YES or NO

First Name: _____ MI: ____ Last Name: _____

Callsign: _____

Gender: Male Female Occupation (optional) _____

Address: same as Primary person on Side 1

Home Phone: _____ Work (optional) : _____

Cell Phone: _____ Cell Carrier: _____

May the Club text you re: Nets _____ Meetings _____ Incident Callout _____

Email: _____

Permission to include in the Club directory, including online (circle one): YES or NO

First Name: _____ MI: ____ Last Name: _____

Callsign: _____

Gender: Male Female Occupation (optional) _____

Address: same as Primary person on Side 1

Home Phone: _____ Work (optional) : _____

Cell Phone: _____ Cell Carrier: _____

May the Club text you re: Nets _____ Meetings _____ Incident Callout _____

Email: _____

Permission to include in the Club directory, including online (circle one): YES or NO

SEE SIDE 1 FOR SIGNATURE OF PRIMARY MEMBER