

Lehigh County RACES Application Form

Name: _____ Call: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____ County: _____

License Class: _____ Primary Radio Interest: _____

	160	80	40	20	15	10	6	2	220	440
CW										
FM										
RTTY										
SSB										
Mobile										
Packet										
If operating packet, the callsign of your PBBS is _____										

Can your home operate without commercial power? yes no
 If yes, what bands? _____

Signed: _____ Date: _____

<p>MAIL TO: Jeff Kelly (N3MFT) 410 N. Marshall St. Allentown, PA 18104</p>	
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