

**NORTHERN CALIFORNIA REPEATER USERS GROUP**

APPLICATION FOR INDIVIDUAL MEMBERSHIP:

Applicant's Unit # \_\_\_\_\_ (Leave Blank)

Applicant's Name: \_\_\_\_\_

Secondary Applicant Name: \_\_\_\_\_ (Same Household)

Applicant's Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant's Phone: (Home) (\_\_\_\_) \_\_\_\_\_ (Work) (\_\_\_\_) \_\_\_\_\_

Number of Units: **BASE:** \_\_\_\_\_ **MOBILES:** \_\_\_\_\_ **HANDHELDS:** \_\_\_\_\_

Personal G.M.R.S. Call Sign - \_\_\_\_\_ Application is Pending: \_\_\_\_\_ (Date filed)  
(Enclosed a Copy) (Enclose Copy of Temp. License)

I AGREE TO ABIDE BY ALL NorCal Rug, AND F.C.C. RULES AND REGULATIONS, AND WILL BE PERSONALLY LIABLE FOR ANY FINES IMPOSED BY THE F.C.C. ON THE USE OF A G.M.R.S. SYSTEM, DUE TO MY IMPROPER AND/OR ILLEGAL OPERATION. I FURTHER AGREE TO BE LIABLE FOR ANY AND ALL LEGAL FEES INCURRED BY NORTHERN CALIFORNIA REPEATER USERS GROUP, DUE TO MY NON-PAYMENT OF SUCH FINES.

I AGREE TO STOP OPERATING ON ANY REPEATER(S), **IMMEDIATELY** AS DIRECTED AND IN WRITING BY NorCal RUG. I WILL NOTIFY NorCal RUG OF ANY DATA CHANGES PERTAINING TO MY OPERATIONS ON THE G.M.R.S. SYSTEM(S).

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

A published list of members will be offered to all members and REACT Teams. If you do not wish to have your Name, Address, and/or Phone # published, Please INDICATE:

**DO NOT LIST:** Name  Address  Phone # (H)  (W)   
Secondary Name

Membership Fees \$ \_\_\_\_\_ (Refundable if application is denied)

Sponsor: \_\_\_\_\_

**DO NOT FILL OUT BELOW THIS AREA**

Training Required?: Yes:  No:

Membership Approval: Yes:  No:  Date: \_\_\_\_\_

AUTHORIZED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

Title: \_\_\_\_\_