

Flagler Emergency Communications Association Inc.
21 Fernmill Ln
Palm Coast, Florida 32137

APPLICATION FOR F.E.C.A. MEMBERSHIP

Thank you for your interest in FECA. Membership is open to all who have an interest in emergency communications (including A.R.E.S., R.E.A.C.T., SkyWarn, and R.A.C.E.S.) and all aspects of communications as a hobby and/or service.

STATEMENT OF PURPOSE: Flagler Emergency Communications Association shall be primarily dedicated to public service through communications in the spirit of national and local plans instituted by government (Federal, State and Local) and organizational (R.E.A.C.T. R.A.C.E.S. and A.R.E.S.).

Is also understood that becoming a member of F.E.C.A. requires active participation during emergencies, public service events and other sponsored activities by the Flagler Emergency Communications Association, including but not limited to, meetings, Nets etc.

MEMBERSHIP CATAGORIES:

FULL membership is available to licensed Amateur Radio and GMRS operators and who support the purposes of F.E.C.A. with their time, talent and maximum participation. Full members have all voting rights and privileges. Full members 18 years or older have the right to hold office.

Dues: \$40.00 per year.

FAMILY membership is available to all licensed Amateur Radio Operators and R.E.A.C.T. members who are the immediate family members, living in the **same household** as a full member. They have all the rights and privileges of full members. However, an initial fee of \$10.00 is required. Please indicate the callsign of the related family member. On this application.

STUDENT membership is available to all licensed operators who are attending an accredited school, university or technical school on a full time basis.

Dues: \$5.00 per year (Up to 16 years of age)
\$10.00 per year (Over 16 years of age)

SENIOR membership is available to all licensed operators who are not employed and at least 70 years of age.

Dues: \$10.00 per year.

ASSOCIATE membership is available to any individual, organization or corporation who desires to support the purposes of the organization. Associate memberships are available to **other than** licensed operators and have **limited** privileges.

Dues: \$15.00 per year.

Family, student and Senior memberships require proof of eligibility and are required to pay a \$10.00 initiation fee.

FECA MEMBERSHIP APPLICATION

Call _____ Active(Full)____ Family____ Student____
 Senior _____ FECA Associate _____

Name _____ Spouse's Name _____

Address _____

City-State-Zip _____ Telephone _____ E-Mail _____

Date of Birth _____ Spouse's Birthday (Month & Day) _____

Occupation _____ Employer _____

Year first Licensed _____ Present License Class _____

Other Licenses/Calls, Foreign or Commercial _____

ARRL Member? _____

Do hold any Amateur Radio related awards? _____ If so, Which ones? _____

Will you endeavor to take part in all FECA activities, e.g. chair committees, participate on committees, participate in Field Day and public service events? Yes or No (circle one)

Interests (circle all that apply):

<u>Operating</u>	<u>Construction</u>	<u>Bands</u>	<u>Modes</u>
DX	Antennas	160	CW
Contests	Receivers	80	SSB
Rag Chewing	Transmitters	40	FM
Field Day	Test Equipment	20	RTTY
Awards	Amplifiers	15	FAX
Traffic	Aux. Equipment	10	SSTV
Public Service	Other (name)_____	WARC	Packet
Other (name)_____		VHF	ATV
		UHF	Other (name)

Amateur and/or GMRS Radio Call _____ Class of License _____

Capabilities: VHF ___ Mobile ___ Base ___ Handheld / Portable ___
 UHF ___ Mobile ___ Base ___ Handheld / Portable ___
 HF ___ Mobile ___ Base ___ Handheld / Portable ___

Back Up Power _____ Other Type of Power Source _____

Any specialty communications (Packet – RTTY - APRS)

Other Modes of Communications - Non Amateur

Cell Phone _____ CB radio _____ GMRS _____ Business band _____

Marine Radio _____ Fire Service / Law Enforcement _____ Other _____

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Are you a member of any of these organizations and agencies?

ARES _____ RACES _____ Red Cross _____ Fire Dept. _____ REACT _____

SKYWARN _____ C.O.P.S. _____ U. S. Coast Guard Aux. _____ C.A.P. _____

Military _____ Other _____

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FEMA and other Certificates:

I understand that **FECA** is an Emergency Communications Organization. I may be called upon to assist at any time of day or night during an emergency. I also understand that **membership requires active participation in the organization.**

Signature _____ Date _____

Applicant's Name (Please Print) _____

Accepted by: _____

_____ Date _____