



**Auxiliary Communications (AUXCOMM)**  
Volunteer Registration  
Sussex County, Delaware

Last Name \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Optional)

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**FCC License:**

Call Sign: \_\_\_\_\_ License Class: \_\_\_\_\_ Expiration: \_\_\_\_\_

**Level of Activity:**

- Active Volunteer *FCC License and available to respond for AuxComm activation & exercises*
- Auxiliary Volunteer *FCC License with limited availability to respond*
- Associate Volunteer *No FCC license but available to assist during activation & exercises*

**CERTIFICATES, LICENSES, and SPECIAL SKILLS:**

FEMA Incident Management Training :  IS-100  IS-200  IS-700  IS-800

Other EmComm Courses  ARRL #67044  ARRL #68230  SKYWARN

List Special Skills and Abilities (other than radio, i.e. medical, computer, clerical, etc.)

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List Public Service Experience:

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Area of Interest: (describe the area where you are most interested in participating)

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**Radio Equipment & Communication Capabilities:**

Does your home station have emergency power?  Yes  No

What:  Generator  Battery  Solar

Do you have internet access in your station?  Yes  No

Home station operational on:

HF \_\_\_\_ SSB \_\_\_\_ CW \_\_\_\_ RTTY \_\_\_\_ HF \_\_\_\_\_

Digital Modes? \_\_\_\_\_ Antenna(s) Height (ft.) \_\_\_\_\_

VHF  UHF Digital Modes? \_\_\_\_\_ Antenna(s) Height (ft.) \_\_\_\_\_

Mobile Operational on:

HF Bands \_\_\_\_\_ Modes \_\_\_\_\_

VHF Bands \_\_\_\_\_ Modes \_\_\_\_\_

UHF Bands \_\_\_\_\_ Modes \_\_\_\_\_

Four Wheel Drive Vehicle?

Do you have a personal "Go Kit" (if yes describe)

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Do you have equipment for portable operation? (If yes describe)

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I am registering as an AUXCOMM operator. I understand that in any emergency I will not self-deploy but will wait for direction to be issued by the Sussex County AUXCOMM Coordinator or his designated agent.

In addition, I understand that this registration also applies to Radio Amateur Civil Emergency Service (RACES).

Signature \_\_\_\_\_ Date \_\_\_\_\_