

Important: Please do not mix electronic payments with paper applications, or vice versa, as this greatly delays the processing of your application.

To Apply by U.S. Mail:

1. Download the form and open with Adobe reader, then print it out (it will be blank)
2. Fill it in completely with pencil or pen (please write legibly)
3. Mail, along with your payment, to the address on the application (please use correct postage).

OR:

First, download the form and open with Adobe Reader. Complete the membership application form (this document) on your computer screen.

Second, save the completed form using the SAVE AS feature.

1. Save the form in "My Documents" so you can find it later
2. Give the form a new name that includes your call sign
(Example: [KF5RD_Membership_Applications.pdf](#))

OM International Sideband Society, Inc. Membership Application

DO NOT WRITE IN THIS SPACE
OM# _____
DATE _____

Formal Name _____
(As it is to appear on the certificate)

First Name _____ Your Call Sign _____
(How you prefer to be addressed on the air)

Address _____ City _____

State _____ Zip Code _____ County _____

Grid Square _____ Email Address: _____

My station is located within the corporate limits of a U.S. State Capital City.

Log information of 2 OMISS Members Worked:
(Calls must be made during OMISS nets and on OMISS frequencies)

OM# _____ Call _____ Date _____ Freq _____ Time (GMT) _____

OM# _____ Call _____ Date _____ Freq _____ Time (GMT) _____

Payment: I agree to pay \$10.00 for a lifetime membership.

MAKE CHECKS PAYABLE TO OMISS. DX stations please use International Money Order or U.S. currency.

Check this box if you are paying through PayPal.

The OMISS PayPal address is membership@omiss.net

Please be sure to include your Callsign in the message area on the PayPal screen. Please do not send payments to any other address.

Print this form and send it with the lifetime membership fee to:

Peter Mann, KF5RD
722 South 138 East Avenue
Tulsa, Oklahoma 74108

I certify that the information provided is correct.

Signed: _____ Date: _____
(Signature not required for electronic submission)

Revised: JULY 2017

Optional:

OMISS offers two awards that relate to past and present Military Members and/or First Responders. If you would like to have your service reflected so that others may work you for these awards, please fill in the information below. (You may also do this online with the submit forms available on the OMISS home page.)

Past or present Military?

Branch _____ Status _____ Dates Served _____

Branch _____ Status _____ Dates Served _____

Branch _____ Status _____ Dates Served _____

Past or present Fire Fighter, Police, EMT, or Dispatcher?

Service _____ Status _____

Service _____ Status _____

Service _____ Status _____

Service _____ Status _____

Service would be Firefighter, Police, EMT, or Dispatcher.
Status would be Active, Inactive, or Retired.

(If you served in more than one category, fill in as many lines that apply.)

