

**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 _____
(How you prefer to be addressed on the air)

Address _____

City _____ State _____ Zip Code _____

County _____ Grid Square _____

E-Mail Address: _____

May we include your e-mail address in the online directory? _____

Log Info of 2 OMISS Members Worked:

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

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

Roster Option:

___ I would like to pay \$7.00 for lifetime membership and download my own roster.

___ I would prefer to pay \$13.00 for lifetime membership, and receive a paper roster.

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

**KAOAK
Dick Zenge
524 N. Russell
Snohomish, WA 98290**

Make checks payable to OMISS. DX Stations please use International Money Order or U.S. Currency.

I certify that the above information provided is correct.

Signed: _____