




Hill Country REACT Team

www.HillCountryREACT.org
 P.O.Box 1487, Canyon Lake, TX 78133

Please TYPE or PRINT neatly on this Membership Application.

(All fields should be filled in, or marked N/A if not applicable.)

Personal Information: <i>This information is required. Please fill in all fields, or mark N/A if not applicable.</i>					
Name (Last Name, First Name, Middle Initial)					Age
Address :		Apt # (if applicable)		E-Mail Address:	
City:		State:		Zip:	
Home Phone	<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	Work Phone	<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	Pager / Cell Phone	<input type="checkbox"/> Pager <input type="checkbox"/> Cell
Birth Date (Month, Day, Year)	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married	Children # _____ <input type="checkbox"/> Yes <input type="checkbox"/> No		
Spouse's Name (if married) & Call Sign (if applicable)			Children's Names		Age(s)
Radio Information: Since REACT is a radio oriented organization it is important for us to know what radio licenses you have and what class or restrictions such license offers. We also need to know if you are a registered ARRL member, info we can use to determine if we qualify as an "ARRL special services club" as well as being a REACT Team. Renewal Date below refers to the time which you will need to file for renewal of your current license or ARRL membership (if applicable).					
Licensed GMRs:		If Yes, Call Sign: _____		Renewal Date: ____/____/____	
Licensed Amateur:		If Yes, Call Sign: _____ Class: _____		Renewal Date: ____/____/____	
ARRL Member:		If Yes, Renewal Date: ____/____/____			
Many of our events which we work, often provide items such as T-Shirts to the volunteers who work the event. While we prefer that our members wear their uniform shirts rather than these T-Shirts during the event, we still need to know your preferred T-Shirt Size to help us notify any event sponsors how many of which size shirts we may need them to provide. Please indicate below, your preferred t-shirt size . {You may change it later if you wish.}					
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> XX-Large <input type="checkbox"/> XXX-Large <input type="checkbox"/> 4X-Large					
 Personal Skills / Training / Hobbies: REACT members come from a wide variety of backgrounds and experiences. It is extremely helpful to the REACT Board of Directors to be aware of any special skills, training, or hobbies that may be of use to the team. This includes also such things as radio electronics, communications, computer programming or repair, special drivers licenses, medical training, disaster training or experience. The list is endless. Failure to supply this information will not affect your application for membership.					
_____ _____ _____ _____ _____					

Other Organizations involved with:

Due to the multitude of other agencies or organizations that REACT works closely with, it is important for us to know what other organizations, clubs, etc. that you may currently belong to. No member is expected to be 100% available. There will always be times when your family, church, employment, or other obligations may take priority over REACT Team meetings or activities.

Name	Purpose of organization	Your Position/Connection
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Personal References:

REACT membership carries responsibility. Our members must be able to work closely with law enforcement officers and the general public in a position of trust and responsibility. This is why we request three (3) non-family personal references.

Name	Address or Contact Phone Number	Relation
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Reason(s) for wanting to become a member:

Briefly state why you wish to be a REACT member.

Disclosure and Membership Agreement Notice:

The information contained on this Membership Application will remain confidential, and will not be released outside of the Board of Directors without your permission, other than for use in official Team rosters or registration, and/or for insurance purposes. If you are holding a valid radio operator's license (either Amateur or GMRS), you must supply a copy of it with this application.

In the event of acceptance, you agree to follow the rules and regulations outlined in the Team's bylaws (as may be ammended by the membership), and will conduct yourself in such a manner as to not reflect unfavorably upon the REACT Team. You will be on probation for 60 days following acceptance of this application, and payment of dues.

You certify that all answers given on this application are true to the best of your knowledge. You understand that this application is not an application for employment, and is not a contract of membership. Acceptance is dependent upon a vote by the current membership.

*Annual Dues are paid to REACT International to cover cost of membership registration. **Annual Dues Rate subject to change from year to year as set by the REACT International Board.***

DUES: Annual REACT International dues:	\$ _____
Initial Team dues:	\$ _____
Total to be submitted with application:	\$ _____

Signature of Applicant

Date
