

1 X 1 CALL SIGN REQUEST _____

COORDINATOR WCARS/VEC

BEGINNING DATE _____

ENDING DATE _____

NAME OF EVENT _____

REQUESTOR NAME _____

REQUESTOR CALL SIGN _____

REQUESTOR CURRENT MAILING ADDRESS _____

REQUESTOR CITY _____

REQUESTOR STATE _____

REQUESTOR ZIP CODE _____

REQUESTOR E-MAIL ADDRESS _____

REQUESTOR DAYTIME PHONE _____

SUBMIT REQUEST TO

Win Guin
W2GLJ
VP WCARS
1X1 CALL SIGN REQUEST
901 754-4552
901 757-3874 (fax)
Winguin@bellsouth.net
wcarsvec@wcarsvec.net

