BRISBANE AREA WICEN GROUP INC.

Application for Participation in an Exercise

Name of Exercise:_____

Surname:_____

Preferred Given Name: _____

Address: Residential: _____

_____

Postal: _____

Phone:_____**Mobile:**_____**Other:**_____

Email: (if applicable) _____

Signature:_____

Vehicle Details: Make/Model: _____

Registration: _____

Mode of Operation: (please circle)

Voice	**70 cm**	**Data**	**70 cm**	**Assistant**
	2 metre		**2 metre**	
	HF		**HF**	

Preferred Location: (please circle)

Base_____**Field**_____**Other**_____

Availability: Days: _____ **Times: AM PM**

Shirt Size:_____ (preference will be given to field operators)