

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

To submit this form on paper:

1. 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)

To submit the OMISS Membership Form electronically:

First, complete the membership application form (this document) on your computer screen.

Second, save the completed form using the **SAVE AS** feature:

- Save the form in “My Documents” so you can find it later.
- Give the form a new name that includes your call sign.
Example: *K5ENA_Membership_Application.pdf*

Third, attach the saved form to an email and send it to K5ENA@COX.NET.

Finally, follow the instruction on the form for submitting an electronic payment using payment.

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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: _____

Log Info of 2 OMISS Members Worked:

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

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Payment: I agree to pay \$7.00 for 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 OMISS@COX.NET.

Please be sure to include your Callsign in the message area on the PayPal screen.

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

K5ENA John S Campbell

3505 S Jamestown Ave

Tulsa OK 74135-1843

K5ENA@COX.NET

I certify that the information provided above is correct.

Signed: _____

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 info 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: _____

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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 as apply.)

