

NORTH SHORE EMERGENCY ASSOCIATION (NSEA)

REPEATER AUTHORIZED USER OR NSEA MEMBERSHIP APPLICATION

If you are interested in utilizing the NSEA affiliated repeaters AND/OR interested in becoming a regular member of NSEA, please fill in this application form with your contact information.

First, Middle Initial & Last Name: Suffix: (Jr., II, etc...)

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Street Address: (& Apt. #)

City/Town, State & Zip Code:

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Cell Phone Number:

Email:

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GMRS Call Sign

GMRS Expiration Date:

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Amateur Call Sign: (if applicable)

Amateur Expiration Date:

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While the new leadership team is working on creating a new website, save this completed application, as a pdf file, & email a copy to:

info@nsea.com