



CREST-NSW Inc. Membership Application



Name

Sex (M/F)

Address

Date of Birth

.....

.....

Vehicle Type

Phone

Mobile

First Aid Certificate Number.....

E-mail

If you are joining as a monitor, please complete this section.

Do you have CB radio equipment? (Yes/No)

If 'yes' do you have the following equipment at home?

27MHz radio (Yes/No) Type (eg AM or AM/SSB)

UHF radio (Yes/No)

Is your telephone located close to the radios? (Yes/No)

Community service involvements:

Why do you wish to join CREST ?

.....

.....

.....

Name address and contact number of three character referees:

1)

2)

3)

I state that the above information is true and correct, and I agree to abide by the Constitution of CREST-NSW if accepted.

Signature of Applicant Date

Office use only:

.....