

***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](mailto:K5ENA@COX.NET).

**Finally**, follow the instruction on the form for submitting an electronic payment using PayPal. **The OMISS PayPal address is [OMISS@COX.NET](mailto:OMISS@COX.NET).** *Please do not send payments to any other address.*

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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) \_\_\_\_\_

OM# \_\_\_\_\_ Call \_\_\_\_\_ Date \_\_\_\_\_ Freq \_\_\_\_\_ Time (GMT) \_\_\_\_\_

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](mailto:OMISS@COX.NET).

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

*Please do not send payments to any other address.*

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

K5ENA John S. Campbell  
3505 S. Jamestown Ave  
Tulsa OK 74135-1843

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.)

