

# Amateur Radio Study Session

**Please print LEGIBLY and mail to**

Kauai Amateur Radio Club, KH6AS

6447 Kahuna Rd

Kapaa, HI 96746

Date: \_\_\_\_\_

Last name \_\_\_\_\_

First name \_\_\_\_\_ Middle initial \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Day phone \_\_\_\_\_

E-mail \_\_\_\_\_

Social Security # (required by FCC) \_\_\_\_\_

Sponsor (name and call sign) \_\_\_\_\_

Test class (check one) Tech \_\_\_\_\_ (if upgrade) General \_\_\_\_\_ Extra \_\_\_\_\_

Ham call (if you have one) \_\_\_\_\_ License class \_\_\_\_\_

Please have two IDs (required by FCC). One must be a picture ID. Two picture IDs is preferred.

ID type: DL # \_\_\_\_\_ Passport # \_\_\_\_\_

Other \_\_\_\_\_

Please have exact change in cash.

Test only - \$14 \_\_\_\_\_ Study guide - \$8 \_\_\_\_\_ Study guide and test - \$22 \_\_\_\_\_

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## Amateur Radio Study Session      Receipt

Last name \_\_\_\_\_ First name \_\_\_\_\_

Test class – Tech \_\_\_\_\_ General \_\_\_\_\_ Extra \_\_\_\_\_

Please do not write below this line

Amount received \_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_