

# West Tyrone Amateur Radio Club

## Foundation / Intermediate Course Application Form

Please use BLOCK CAPITALS to clarify entries

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Mobile No: \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_

Signed: \_\_\_\_\_

*(Must be a Parent / Guardian if under 18)*

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

*(If under 18)*

*Please note attending the course is **not** an automatic pass.  
All candidates must pass the RCF/RSGB exam to qualify for a pass certificate.*

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### *Official Use Only:*

Date Received:

Fee Received:

Date Sent:

**Data Protection:** Personal details are not used for any other purpose other than course/exam administration

### **Enquiries and Forms to:**

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