

**PREREGISTRATION FORM**  
 FCC Amateur Radio Operator License Examination  
 by the ARRL VEC Tokyo VE Team

**PLEASE PRINT or TYPE**

|                  |        |                 |  |
|------------------|--------|-----------------|--|
| Last Name:       |        | Suffix:         |  |
| First Name:      |        | Middle Initial: |  |
| Current address: |        |                 |  |
| E-mail:          | Phone: | Fax:            |  |

|                           |        |
|---------------------------|--------|
| 日本語 : (for Japanese only) |        |
| 氏名 ;                      | 郵便番号 : |
| 住所 :                      |        |

|                       |        |
|-----------------------|--------|
| Current US Call Sign: | Class: |
|-----------------------|--------|

|                         |
|-------------------------|
| Mailing Address in USA: |
|-------------------------|

|                             |    |      |                                   |
|-----------------------------|----|------|-----------------------------------|
| Do you have any valid CSCE? | No | Yes: | Element: / Date issued (mm/dd/yy) |
|                             |    |      |                                   |

|   |                 |              |            |
|---|-----------------|--------------|------------|
| Which element(s) do you wish to take at this session? |                 |              |            |
| 1: (Morse Code)                                       | 2: (Technician) | 3: (General) | 4: (Extra) |

|  |
|--|
| (Non American citizen only)<br>Your home Call Sign |
|--|

|                |        |      |       |
|----------------|--------|------|-------|
| Date of birth: | Month: | Day: | Year: |
|----------------|--------|------|-------|

Please attach a photocopy of your valid FCC license and/or valid CSCE.

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