

Laramie County ARES®



ARES® Application

Name: _____

Street Address: _____

City: _____

State: _____ Zip Code: _____

Home Phone Number: (____) _____

Cell Phone Number: (____) _____

E-mail Address: _____ Call Sign: _____

License Class: () Technician () General () Advance () Extra

Personal Equipment Information: Circle all that apply

B = Home Base Station H = Handheld M = Mobile Station P = Portable Station and Power

HF	160M	80M	60M	40M	30M	20M	17M	15M	12M	10M
SSB	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P
CW	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P
Winlink	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P
Fldigi	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P
WSJT-X	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P
Packet	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P	B M P

Crossband Repeater () Yes () No

APRS () Mobile () HT () Portable

Can your home station be operated without commercial Power? () Yes () No

Other equipment: _____

VHF +	2M	1.25M	70CM	23CM
FM	B H M P	B H M P	B H M P	B H M P
SSB	B H M P	B H M P	B H M P	B H M P
CW	B H M P	B H M P	B H M P	B H M P
Winlink	B H M P	B H M P	B H M P	B H M P
Fldigi	B H M P	B H M P	B H M P	B H M P
WSJT-X	B H M P	B H M P	B H M P	B H M P
Packet	B H M P	B H M P	B H M P	B H M P
DMR	B H M P	B H M P	B H M P	B H M P
D-Star	B H M P	B H M P	B H M P	B H M P
Fusion	B H M P	B H M P	B H M P	B H M P

OVER

01/25/2022

Laramie County ARES®

ARES® Application Continued:

Affiliation Information: RACES MARS (Call Sign) _____

CERT SHARES (Call Sign) _____

Completed Courses:

Emergency Management Institute:

IS-100 IS-200 IS-300 IS-400 IS-700 IS-800

Amateur Radio Relay League

EC-001 EC-016 PR-001

National Weather Service

Skywarn Basic Skywarn Advanced

Other relevant training or experience:

(Signature of Applicant)

(Date)



Laramie County ARES® CODE OF CONDUCT

The Laramie County ARES® program has served the community for many years. The continued success has been achieved due to the dedication and commitment of our members, who continually strive to be a resource to Laramie County communities.

You represent the ARES® program to new volunteers, to the public, and to those to whom we render our services. It is important to portray a positive image.

ALL VIOLATIONS WILL BE THOROUGHLY INVESTIGATED. DURING THE INVESTIGATION PROCESS, INVOLVED VOLUNTEERS WILL BE TEMPORARILY SUSPENDED FROM ALL ARES® ACTIVITIES, PENDING THE OUTCOME OF THE INVESTIGATION. SAID VOLUNTEERS WILL BE NOTIFIED AS TO THEIR STATUS WITH THE ARES® PROGRAM BY THE ARES® EMERGENCY COORDINATOR AND/OR THE CLCEMA DIRECTOR. PROGRESSIVE DISCIPLINE INCLUDES, BUT IS NOT LIMITED TO, DISMISSAL FROM THE ARES® PROGRAM, COUNSELING, WRITTEN NOTICE, AND RESTRICTION OF INVOLVEMENT WITH THE LC-ARES® PROGRAM TO ARES® COMMUNITY MEETINGS, DIVISION TRAININGS AND REFRESHERS.

As a volunteer with the LC-ARES® program, you are expected to comply with the following:

1. Dial 911 for all emergencies, first.
2. Know that you are trained to function as an extension of the emergency response to designated disasters, when such circumstances exist or when directed by emergency services officials. When disaster occurs, your first responsibility is to ensure your own safety and the safety of your family. After, you can respond to the designated meeting place to join with other ARES® volunteers. You shall not respond to any type of incidents without the approval of the Cheyenne/Laramie County Emergency Management Agency.
3. Do not self-deploy to local events (fires, accidents, etc.). Only the ARES® Call-Out Teams that are requested by the Cheyenne/Laramie County Emergency Management Agency (CLCEMA) may respond. Alert Messages (email, Twitter, radio, etc.) sent to the general public are NOT official instructions or authorization to take action.
4. Stay within the scope of your training. You have been trained under the curriculum of the American Radio Relay League's ARES® program. Confine your actions to those guidelines and stay within the scope of your training and certification.
5. LC-ARES® team volunteers may be provided with basic supplies, including a backpack upon the successful registration in the ARES® program.
 - a. LC-ARES® team volunteers are responsible for replenishing their own supplies contained within their backpacks in the event items are lost, stolen, or used at home. LC-ARES® will only replenish items after use during training or an emergency response.
 - b. Persons participating in the LC-ARES® program agree to and understand that equipment and supplies provided to them for training and/or activation are the properties of the Cheyenne/Laramie County Emergency Management Agency. (CLCEMA)
 - c. Volunteers will use the equipment and supplies provided only for LC-ARES® training sessions and/or activations.
 - d. Volunteers will maintain equipment and supplies in proper working condition.
 - e. Volunteers will report damaged equipment and supplies to the Cheyenne/Laramie County Emergency Management Agency Director or designee immediately.

- f. ARES® Equipment and supplies, including ID badges and uniforms will be returned to the Cheyenne/Laramie County Emergency Management Agency Director when a member:
 1. Resigns from the LC-ARES® program.
 2. Is physically unable to complete tasks.
 3. Is removed from volunteer roles for rule violations.
6. Confine your actions to your physical and resource limitations when responding as a member of ARES®. Such limitations may be determined by, but not limited to, equipment available, physical abilities, knowledge, authority and hazards.
7. Conduct yourself with professionalism, dignity and pride, and act appropriately and responsibly at all times while assisting others.
8. Treat fellow team volunteers, visitors, other volunteer program participants, guests, and property with respect and courtesy.
9. Be sensitive to the diversity of team volunteers and those we assist.
10. Direct anyone who is looking for official statements from LC-ARES® to the Cheyenne/Laramie County Emergency Management Agency, 307-633-4336.
11. Respect the privacy of persons served by LC-ARES® and hold, in confidence, all sensitive, private, and personal information.
12. Keep LC-ARES® leadership informed of any progress, concerns, or problems with tasks which you have been assigned.
13. Partake of no alcohol while responding as ARES® and do not report for duty while under the influence of alcohol or drugs. Smoking is prohibited during ARES® events except on breaks.
14. You shall not authorize the use of, or use for the benefit or advantage of any person, the name, emblem, endorsement, services or property of the LC-ARES® program, without the approval of Cheyenne/Laramie County Emergency Management Director and the LC-ARES® Emergency Coordinator.
15. You shall not accept, or seek on behalf of any other person, any money or gifts offered as a result of your affiliation with the LC-ARES® program.
16. You shall not use your participation in ARES® to promote any partisan politics, religious matters or positions on any issue.
17. You shall avoid inappropriate conduct, both on- and off-duty, that would jeopardize program effectiveness. Such behavior includes, but is not limited to, the following:
 - a. Offensive or profane language or gestures
 - b. Public criticism of an ARES® team member, its leaders or the ARES® program
 - c. Jeopardizing another team member's safety.
18. You are prohibited from taking photos or the distribution of photos during activations or trainings without the approval of CLCEMA.
19. The use of a cell phone while driving during ARES® activities is prohibited and should only be used during an ARES® activity for emergency purposes. Taking photos or videos of scenes and activities is prohibited without the consent of CLCEMA.

Laramie County ARES® is committed to a policy of fair representation and will not discriminate on the basis of race, ethnicity, age, disability, gender, color, religion, sexual orientation, geography, or group affiliations. Volunteers will adhere to these same standards in the course of their duties.

By executing this form, I certify that I have read the Laramie County ARES® Code of Conduct in its entirety, understand all of its terms and have had any questions regarding this release or its effect answered. I understand that my submission of this form, whether mailed; or sent electronically via email or faxed, shall have the same force and effect as an original. I sign this release freely and voluntarily.

Signature: _____

Date: _____



**CHEYENNE / LARAMIE COUNTY
EMERGENCY MANAGEMENT AGENCY**

**Emergency Management • Fire Warden
Jeanine West, Director
Matthew Butler, Operations/Fire Warden
Beth Harris, Executive Assistant**



Volunteer Registration

Volunteer Team: _____

Name: _____

Address: _____

SSN: _____

Date of Birth: _____

Phone: (Home) _____

(Cell) _____

Email: _____

- ❖ Information provided is for workman's compensation purposes only. At no time will this be given to anyone outside of Laramie County Government.

**3962 Archer Parkway • Cheyenne WY 82009
(307) 633-4336 Fax: (307) 633-4337**

REQUEST TO PARTICIPATE AND RELEASE OF LIABILITY

LARAMIE COUNTY EMERGENCY MANAGEMENT VOLUNTEER

Name : _____
(First) (Middle initial) (Last)

Address: _____
(Street) (City) (State) (Zip code)

I hereby acknowledge that volunteer work with the Laramie County Emergency Management Agency (LCEMA) may involve physical exertion and physical contact or exposure to various environmental and man-made hazards and carries an inherent risk of injury, property damage and/or death. I knowingly and voluntarily accept the burden of any and all such risks, including, but not limited to, physical and financial risks.

Further I do hereby, for myself, my heirs, personal representatives and assigns, release and discharge Laramie County and/or any of its agencies, their employees, agents and elected officials, successors and assigns from all actions, causes of action, damages, claims or demands for all known or unknown personal injuries, property damage or death resulting from or arising out of volunteer work with LCEMA.

By my signature below, I certify and warrant that I have read and fully understand the foregoing **Release**. I acknowledge that Laramie County does not waive its governmental immunity by allowing me to participate as a volunteer. Further, I am signing this **REQUEST TO PARTICIPATE AND RELEASE OF LIABILITY**, freely, voluntarily and without coercion and in exchange for the consideration of the opportunity to participate as a volunteer with LCEMA.

Witness

Participant

Date

Date