



SOUTH AFRICAN RADIO LEAGUE

P O BOX 1721 STRUBENSVALLEI 1735 SOUTH AFRICA

TEL 011 675 2393 FAX 011 675 2793

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APPLICATION FOR APPOINTMENT AS A MORSE CODE EXAMINER / MODERATOR

(Please print)

Call sign	SARL membership number	
First names	Surname	
Title	Identity Number	
	Date of birth	
Home address		Postal code
Postal address		Postal code
Home telephone	Work telephone	
Fax number	Cell number	
Email address		
SARL Affiliated club to which applicant belongs		
SARL membership category	Joining date	
Proposer (Chairman) – Signature & callsign	Seconder (Committee Member) – Signature & callsign	

I HEREBY CONFIRM AND ACCEPT THE FOLLOWING CONDITIONS:

- 1 I have held a Class A licence for more than two years
- 2 I have passed the 12 wpm Morse Code examination.
- 3 I am a fully paid up member of the SARL as indicated above.
- 4 My application is supported by a SARL affiliated Radio Club as indicated above.
- 5 I undertake to abide by the procedures and rules applicable to examination and moderation as laid down by the SARL from time to time.
- 6 I will abide by the requirements of the Telecommunications Act of 1996 (as amended from time to time) and the Radio Regulations Promulgated thereunder.
- 7 I undertake to strictly abide by the Radio Amateur Code of Conduct.
- 8 I agree that in the event of no longer being able to fulfil the role as examiner/moderator, or if I resign from the club for any reason, contravene the conditions of my appointment, contravene the Telecommunication Act or any regulations, or am found to act in a dishonest or fraudulent manner, my appointment becomes null and void and will cease all examinations and return all forms in my possession.
- 9 I have read and understand all the conditions of this appointment.

Signature	Date
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