



US ARMY – GOVERNMENT APPLICATION FORM TWO ARMY MILITARY AUXILIARY RADIO SYSTEM (MARS)

Type of Application: <input type="checkbox"/> Military Unit Station <input type="checkbox"/> Government Station	Purpose of Application: <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> New <input type="checkbox"/> Renewal </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> Cancellation Modification </div>	If renewal, modification, or deletion, provide current MARS callsign:		
If applying for a military unit station license, please identify component: Active Component <input type="checkbox"/> National Guard <input type="checkbox"/> Reserve <input type="checkbox"/> Corps of Engineers <input type="checkbox"/> ROTC/JROTC <input type="checkbox"/> Other <input type="checkbox"/>				
Name of military unit or government entity:				
Mailing Address	City	County	State	Zip
E-Mail	Phone		Associated Call Sign	
Point of contact / Station Custodian				
Mailing Address	City	County	State	Zip
E-Mail	Phone		Cell Phone	
List the location or area of operation, and type of additional station(s) required in this authorization: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <i>Indicate Fixed (FB), Mobile (MO) or Temporary Fixed (TF)</i> use additional sheet if necessary </div>				
-1		-9		
-2		-10		
-3		-11		
-4		-12		
-5		-13		
-6		-14		
-7		-15		
-8		-16		

STATION CAPABILITIES*(List all ranges of frequencies on which your station will operate)*High Frequency Range:
(2-30 MHz)Very High Frequency Range:
(30 - 300 MHz)**PRIVACY ACT STATEMENT**

Under the authority of 5 U.S.C. 301 and 10 U.S.C. 133, the information requested on the Army MARS Application for Membership is for the purpose of establishing, renewing, or modifying MARS membership. The form will be maintained as part of official Army MARS records. The information on this form will not be divulged without member's written consent to anyone other than established MARS officials. Disclosure of the information requested on this form is voluntary. However, failure to provide this requested information may result in disapproval of the application or inordinate delays resulting from additional research required to establish satisfactory eligibility.

Check Appropriate Block

Yes

No

I certify that radio stations operated in MARS service shall conform to all Army MARS Rules, Regulations, Policies, and Directives.

I certify that I am the duly appointed official authorized to sign on behalf of the government or military entity represented on this form.

Signature of Applicant:

DATE

(If Military Unit Station, Unit Commander Signature/Title)

*When completed, forward to MARS Headquarters for processing***FOR COMMAND USE ONLY**

Assigned MARS Call Sign:

Date Assigned:

Expiration Date:

Initials: