

WAP P.S.A. - Polar Ship Award

.: Request Form :.

To the Award Manager of
Sezione ARI "Basso Lazio"
c/o Giovanni Messori – Segretario
Via Rotabile, 64
04023 – Formia (LT) – Italy

Name and Surname _____ Call Sign _____

Shipping Address _____

City / Town _____ State _____ Country _____

Zip Code _____ E-mail _____ @ _____

This form to request:

1st WAP P.S.A. Certificate

Endorsement Sticker

I hereby certify that I've operated in compliance with all rules set for this Award and the following list include the confirmed QSO as requested to the rules.

#	CALLSIGN	MODE	BAND	DATE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Date _____

Callsign _____ Signature _____