

# DXCC AWARD APPLICATION

(Required with Each New Submission and Endorsements)

Directions: Please print clearly. (The reverse side is optional if you are sending QSL cards to ARRL HQ.) **Do not include other correspondence with this application.**

I am applying for the following DXCC awards (check ALL as appropriate): (REQUIRED: FILL OUT CHART BELOW)

AWARD TYPE	NEW APPLICATION	ENDORSEMENT
MIXED		
PHONE		
CW		
RTTY		
SAT		
160		
80		
40		
10		
6		
2		
5BDXCC		160 - 17 - 12 - 6 - 2

5BDXCC AWARD NUMBER \_\_\_\_\_

**DO NOT USE THIS FORM FOR PLAQUE/PIN ORDERS**

**Fees:** All Amateurs applying for their first DXCC Award - \$10 (includes certificate and DXCC pin).

Each additional DXCC certificate (new or replacement) - \$10 shipping and handling fee (includes certificate and DXCC pin).

Endorsements and new applications presented at ARRL HQ or conventions (these applications will be limited to 120 QSOs) -- \$5 handling fee.

ARRL members--first submission of the year--\$10, up to 120 QSOs plus return postage.

Additional member submissions within a calendar year of up to 100 QSOs will be \$20, subject to charges above.

Foreign non-ARRL members will be charged \$20 for the first submission in a calendar year, subject to charges above.

Foreign non-ARRL members will be charged \$30 for additional submissions in a calendar year, subject to charges above.

Return postage or SASE must be provided by the applicant for any cards or requests for information.

All applicants in the U.S. and possessions, Puerto Rico, and foreign members MUST complete the following statement:  
"I currently hold ARRL membership expiring \_\_\_\_\_"

(Month/Year)

**ALL** applicants must complete the following statement: "I affirm that I have observed all DXCC rules as well as all pertinent governmental regulations established for Amateur Radio in my country. I agree to be bound by the decisions of the ARRL Awards Committee. (Decisions of the ARRL Awards Committee shall be final.)"

Signature \_\_\_\_\_

Callsign \_\_\_\_\_

Date \_\_\_\_\_

Send application forms, QSL cards, fees, and return postage to: DXCC Desk, ARRL HQ, 225 Main Street, Newington, CT 06111, USA. To confirm receipt, include an SASE or post card with your application. For any questions or clarifications, please write to the DXCC Desk separately at the above address. The DXCC Desk can also be contacted as follows:

Telephone: 860-594-0234 Fax 860-594-0259 (24 hour direct line to ARRL HQ) Email: dxcc@arrl.org web: www.arrl.org/awards/dxcc  
Thank you for your cooperation and Good DX!

## ARRL DXCC Field Representative Verification

I affirm that I have personally inspected the confirmations and verify that this application is correct and true. (DXCC Field Reps must forward the paperwork to HQ.) **(APPLICATIONS FORWARDED BY APPLICANTS ARE INVALID)**

Signature \_\_\_\_\_

Call \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Call \_\_\_\_\_ Date \_\_\_\_\_

**Please complete all sections on this side.**

Call Sign \_\_\_\_\_

Ex Calls \_\_\_\_\_

Name \_\_\_\_\_  
Last (Spanish, Apellido), First

Mailing Address \_\_\_\_\_  
(Number and Street)

\_\_\_\_\_  
(City, State/Country, ZIP)

↑ This is where your cards, paperwork, & certificates will be shipped ↑

☐ Check here if new address

Fill this line out **ONLY** if you will receive a certificate(s) from this submission. Otherwise, leave blank.

Name \_\_\_\_\_  
(Print exactly as you want it to appear on certificate)

Number of QSL Cards Enclosed \_\_\_\_\_

Total Number of QSOs Enclosed \_\_\_\_\_ (Extra QSO fee based on this)

Postage = \$ \_\_\_\_\_ (Check with your local Post Office for current mailing rates)

Awards Fee = \$ \_\_\_\_\_ Total = \$ \_\_\_\_\_

- ☐ U.S. Currency \_\_\_\_\_ ☐ Stamps  
☐ Check or Money Order \_\_\_\_\_ ☐ Valid IRCs  
☐ Credit Card # and Exp. Date \_\_\_\_\_

**NOTE:** IRCs valued at \$0.60 US.

Return My QSL Cards Via:\*

- ☐ Registered Mail (Recommended) ☐ First Class Mail  
☐ Certified (US Only) ☐ Airmail  
☐ United Parcel Service (US Only) ☐ Other-Specify \_\_\_\_\_

\* If left blank, we will ship using Registered mail.

Your Call \_\_\_\_\_

**DIRECTIONS:** (1) Sort cards and list below first by band, e.g. all the 80-meter cards together, then the 40-meter cards, etc. (2) Within each band, sort and list below by mode, e.g. all the 80-meter phone cards, then the 80-meter CW, 40-meter phone, etc. (3) Make one entry below for each QSO credit. (4) Cards indicating multiple contacts should be placed at the end, listing each contact on a separate line below. (5) QSO Date = Day, Month, Year. (6) Bands = 160, 80, 40, 30, 20, 17, 15, 12, 10, 6, 2. (7) Modes = Phone, CW, RTTY, SAT. (8) Full entity name required (not prefix).

	CALL	QSO DATE (DD MM YY)	BAND	MODE	ENTITY
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
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22					
23					
24					
25					

This side of form may be photocopied if more pages are needed. **This side is required only if cards are checked by Field Reps or applications which are checked at conventions.)**