

ELK COUNTY AMATEUR RADIO ASSOCIATION MEMBERSHIP APPLICATION

Name: _____

Call: _____ License Class _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Birthday: _____

E-Mail Address: _____

PLEASE CHECK APPROPRIATE MEMBERSHIPS:

ARRL ARES AIR FORCE MARS ARMY MARS NAVY MARS

QCWA OTHER _____

VOLUNTEER EXAMIBER.....AFFILIATION ARRL LARC OTHER

PLEASE CHECK MEMBERSHIP TYPE:

Full Membership (\$10.00) Requires Amateur License

Family Membership - \$10.00 first family member; \$5.00 each additional family member.

Number of family members _____

Associate Membership - \$5.00. This covers anyone who cannot be a full member.

TOTAL AMOUNT ENCLOSED: _____

Date _____

Dues must be received by January 1, . Please enclose your check or money order with this application and bring both to the next meeting or mail to:

Mary A. Lewis N3UDN
1455 Montmorenci Rd.
Ridgway, PA 15853