



ARCA



Amateur Radio Club of Anderson

MEMBERSHIP APPLICATION & RENEWAL FORM

P.O. Box 1334, Anderson, CA 96007

PRIMARY MEMBER INFORMATION:

DATE: _____

Name: _____ Call: _____

Street/Mail Address: _____ Phone # _____

City: _____ State: _____ Zip: _____

ARRL Member? YES NO License Class: _____

Birthday: _____ Spouse's Name: _____

Anniversary: _____ E-Mail Address: _____

FAMILY MEMBER INFORMATION:

Name: _____ Call: _____

ARRL Member? YES NO License Class: _____

Birthday: _____ Spouse's Name: _____

Anniversary: _____

Other Family Members: _____ Call: _____

CHECK ONE:

- BASIC Membership
\$20 per year
- FAMILY Membership
\$25 per year

Make checks payable to: ARCA

Mail with Application to:

ARCA
P.O. Box 1334
Anderson, CA 96007



AMOUNT ENCLOSED: _____