

THE CHRISTIANS of IDAHO AMATEUR RADIO CLUB, INC.

MEMBERSHIP APPLICATION

APPLICATION TYPE: (Circle One) New Renewal Update

MEMBERSHIP TYPE: (Circle One) Individual Family

Name: Callsign:

Address: e-mail:

City: State: Zip:

Home Phone: Autodial Slot #

FAMILY MEMBERSHIP

LICENSED AMATEURS RESIDING AT SAME ADDRESS TO BE INCLUDED IN MEMBERSHIP

Name: Callsign:

Name: Callsign:

Name: Callsign:

FULL YEAR DUES: (Individual \$2.00-----Family \$5.00) \$

HALF YEAR DUES: (After June 31st. Individual \$1.00-----Family \$2.50) \$

DONATION (Optional, Not required but always appreciated) \$

 Total: \$

Club Use Only:	Date received:	Initialed By:	Date Entered:
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MAIL TO: C.I.A.R.C. PO BOX 1112 NAMPA IDAHO 83653