

Los Angeles Area Council of Amateur Radio Clubs

Membership Application Form

www.qsl.net/laacarc

Treasurer:

URAC-Beverly Pitman, WA6TIU
2902 Onrado St., Torrance, CA 90503

Annual Dues \$10.00

**PLEASE FILL IN THE INFORMATION BELOW
AND SEND TO THE TREASURER**

Club Name: _____

Club Mailing Address: _____

Club E-mail Address: _____

Club Web Page, if any: _____

Meeting Place Address: _____

Day (s) of month and time of meeting: _____

Licensing Classes are held at (address): _____

Day of week and time of Licensing classes: _____

Phone number of Licensing classes: _____

ARRL Affiliated Club: Yes: ____ No: ____ ARRL Service Club: Yes: ____ No: ____

Does your club have Liability Insurance? Yes: ____ No: ____

If yes, with what company? _____

Club President's Name and Call sign: _____

Address and Phone Number: _____

_____ E-mail address: _____

Club Delegates for LAACARC:

1: Name and Call sign of primary: _____

Address and Phone Number: _____

_____ E-mail Address: _____

2: Name and Call sign of alternate: _____

Address and Phone Number: _____

_____ Email Address: _____