

**MEMBERSHIP APPLICATION 2008
MUSKEGON AREA AMATEUR RADIO COUNCIL
PO BOX 691
MUSKEGON, MI 49443-0691**

PLEASE PRINT CAREFULLY

NAME: _____ CALL: _____
 FIRST MIDDLE LAST
ADDRESS: _____
 STREET CITY STATE ZIP
TELEPHONE: _____ CLASS OF LICENSE: _____

PLEASE CIRCLE APPROPRIATE RESPONSES BELOW

ARRL MEMBER? YES NO EMAIL ADDRESS: _____

WOULD YOU LIKE TO RECEIVE *FLASHOVERS* BY EMAIL? YES NO

ANNUAL DUES: REGULAR ADDITIONAL FAMILY MEMBER ASSOCIATE
 MEMBER (\$25) IN THE SAME FAMILY (\$10) MEMBER (\$10)

THIS IS A: MEMBERSHIP RENEWAL NEW MEMBER APPLICATION

DONATIONS

GENERAL _____ REPEATER _____ OTHER (DESIGNATE) _____

DONATION AMOUNT _____

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