



The Starved Rock Radio Club Membership Application

Effective Date: _____

New Member / Previous Member / Renewal / Not Licensed

Class of License
(for ARRL)

Call Sign

Date of Birth

Name

Address

City, State, ZIP

County

Phone Number

E-Mail address

Please circle yes if we can send you STATIC via e-mail only: Yes

List other ham Family Members living at the above address

Call & Name _____

SRRC MEMBERSHIP DUES AND FEES are due in January each year:

Initiation fee for new members is \$5.00 Regular, Non-Licensed and Associate member dues are \$10.00.

Family Member dues are \$15.00 Partial year dues are prorated by month.

Check ___/ Cash Received by _____ Amount Paid \$ ___

NOTICE: Dues for each member must be accompanied by this form. Funds received without this form are considered donations. Complete rules are printed in the Constitution and By-Laws (see www.qsl.net/w9mks) of the Club and I agree to abide by them.

SIGNED _____ DATE _____

Mail completed application to: Francis Kmetz 1004 Park St. Streator, IL 61364, or bring to next meeting