



WEST COAST AMATEUR RADIO CLUB
Membership Application

MAIL TO: P.O. Box 2617
Costa Mesa, CA 92628



Check one:

- New Membership
- Membership Renewal

TODAY'S DATE: _____

Applicant-1 Name: _____ Call/Class: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone:(____) _____ Work:(____) _____ Fax: (____) _____ Cell: (____) _____

E-Mail Address: _____

Occupation: _____

Birth Date: _____ AARL Member? Y or N (____)

Applicant-2 Name: _____ Call/Class: _____

E-Mail Address: _____

Occupation: _____

Birth Date: _____ AARL Member? Y or N (____)

Applicant-3 Name: _____ Call/Class: _____

E-Mail Address: _____

Occupation: _____

Birth Date: _____ AARL Member? Y or N (____)

Publish phone numbers in membership roster? Y or N Home-[____] Work-[____]

\$ _____ WCARC Membership (\$25.00).

\$ _____ Additional Family Members, same address (\$5.00 ea).

\$ _____ WCARC Badges (\$5.00 ea).

\$ _____ Total enclosed.