FISTS CW Club

Membership Application

Call:	Name used	on air:		
Name (First/Last):				
Mailing Address:		State/Drove	Zip/Post Code:	
City:		_ State/FTOV:	Zip/rost Code.	
The following info pro	vides a synopsis of th	e applicant's work	king conditions:	
Rig(s):				
Antenna(s):				
Other club & organiza	tional affiliations (Al	RRL, RSGB, etc.):		
Other interests (QRP,	SAT, etc.):			
Do you require your K	eynote newsletter on	cassette (Blind ap	plicants only): YESNO	
Email Address (Carefu	lly please!):			
How did you hear abou			STS number of member sponsori	ng you, if
If application is for me	mbership as a FISTS	S Affiliated Club:		
Does your club have a	webpage (Give URL)):		
From what area(s) doe	s your club accept m	embers:		
Please mail completed	application with ann	ual subscription o	f \$15.00 in U.S. funds	
Canadian Applicants: DOLLARS	please enclose INTE	RNATIONAL PO	OSTAL MONEY ORDER, paya	ble in U.S.
Please make all checks	and MO's payable to	o: FISTS CW CL	UB	

SEND TO: NANCY KOTT, WZ8C

POB 47

HADLEY, MI 48440-0047

U.S.A.