

**ALGONQUIN
AMATEUR RADIO CLUB
P.O. Box 258, Marlboro, MA 01752**

New
Renewal

APPLICATION FORM

**I hereby apply for membership in and express a willingness to abide by the
Constitution and bylaws of the Algonquin Amateur Radio Club.**

Name _____ Home Phone _____
Address _____ Day Phone _____
City _____ State _____ Zip _____ Email _____
Callsign _____ License Class _____ ARRL Member Y N

Member Profile :

What bands do you operate? (Circle all applicable)

_____ HF _____ VHF/UHF _____
160 80 40 20 17 15 12 10 Meters 50 144 220 440 MHZ Other _____

What modes do you use?

CW SSB AM FM RTTY SSTV Packet Satellite Other _____

What contests do you participate in? _____

What activities would you like the club to participate in ? _____

What would YOU like to do for the club?

Teach classes? _____ Run Contests? _____ Other _____

Operating Year is September through June. No meetings in July & August.

Signature _____ Date _____