Susquehanna County Amateur Radio Club

Application for Membership or Renewal of Membership

Membership Year: 2 0 ____

Name:		Call:
Address:		
City:	State:	Zip:
Phone: Home: ()	Cell: ()
E-Mail:		
ARRL Member: Yes No (circle on	e)	
Other Memberships: (e.g. QCWA)		
Year First Licensed: License	Class: Nov Tech Gen	Adv Ext None (circle one
Amateur Radio Interests: (Circle all	that apply)	
VHF/UHF HF AM FM SSB CV Phone Digital VHF Contests H Field Trips Ham fests Antenna B	F Contests Field Days	Special Event Stations
Other:		
Instructor: Yes No (circle one)	Certified VE: Yes No	(circle one)
Committee Interests:		-
Signed:	Dat	re:
Referenced by:		
Accepted:		
Dues: \$25.00 per year, payable with the	• •	
Please make checks payable to: Susqu	ehanna County ARC.	
Application may be mailed to:		
Susquehanna County ARC	Date Paid:	
PO Box 564		Check #:
Montrose, PA 18801	Received:	Treasurer