



TRI-COUNTY AMATEUR RADIO CLUB

P.O. Box 37
Hoschton, GA 30548

MEMBERSHIP APPLICATION

Call Sign

TCARC USE ONLY!

Date App Rcvd: ___/___/___

Date Pmt Rcvd: ___/___/___

Payment Amt: ___/___/___

Pmt Rcvd By: _____

Memb Apprvd: ___/___/___

Data Base: ___/___/___

Renewals:

APPLICATION TYPE

- NEW MEMBER
- RENEWAL

LICENSE CLASS

- Novice Technician General
- Advanced Extra

MEMBER INFORMATION

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

ARRL MEMBER

- Yes
- No
- Life



CONTACT INFORMATION

E-mail Address: _____

Home Phone #:(____)_____ Work Phone #:(____)_____

Cell Phone #: (____)_____ Date of Birth: ___/___/___ (mm/dd/yy)

TYPE OF MEMBERSHIP

- Individual \$30.00 Annually
- Student \$15.00 Annually
- Family \$35.00 Annually

Membership renewals are due in January.
New Memberships are 50% less after June and run through the end of the current year.

OPTIONAL CONTRIBUTION

Repeater Fund \$ _____

ARRL MEMBER

- Yes No Life

OTHER RADIO AFFILIATIONS

- RACES
- CERT
- VE/VEC
- ARES

ADDITIONAL FAMILY MEMBER (1)

Name: _____ Date of Birth: ___/___/___ (mm/dd/yy)

LICENSE CLASS Novice Technician General Advanced Extra

ARRL MEMBERSHIP

Interests: _____ No Yes Life

ADDITIONAL FAMILY MEMBER (2)

Name: _____ Date of Birth: ___/___/___ (mm/dd/yy)

LICENSE CLASS Novice Technician General Advanced Extra

ARRL MEMBERSHIP

Interests: _____ No Yes Life

I agree to abide to the By-Laws of the **Tri-County Amateur Radio Club** and understand that membership is subject to the approval of the club.

Applicant Signature: _____ Date : ___/___/___ (mm/dd/yy)