



Fulton County Amateur Radio Club

P.O. Box 521, Wauseon, OH 43567

www.k8bxq.org

Membership Application

| | | | |
|---|--------|-----------------|---------------------------|
| Name: | | | |
| Address: | | | |
| City: | State: | Zip: | ARRL Member? |
| Call Sign: | Class: | First Licensed: | Renewal or New Membership |
| Phone Number: <input type="checkbox"/> home <input type="checkbox"/> mobile | | E-Mail: | |

Annual Membership Fees (January 1 – December 31) (Family covers two adults)

Individual Membership \$15 Family Membership \$30 Student Membership \$7.50

| Family Members | Call Sign | Class |
|----------------|-----------|-------|
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| Active Bands: | <input type="checkbox"/> 160 | <input type="checkbox"/> 80/7540 | <input type="checkbox"/> 30 | <input type="checkbox"/> 20 | <input type="checkbox"/> 17 | <input type="checkbox"/> 15 | <input type="checkbox"/> 12 | <input type="checkbox"/> 10 | <input type="checkbox"/> 6 | <input type="checkbox"/> 2 | <input type="checkbox"/> 220 | <input type="checkbox"/> 440 | <input type="checkbox"/> Other _____ |
| Modes: | <input type="checkbox"/> CW | <input type="checkbox"/> SSB/AM/FM | <input type="checkbox"/> Packet/APRS | <input type="checkbox"/> PSK31/Digital/RTTY | <input type="checkbox"/> SSTV | <input type="checkbox"/> Satellite | <input type="checkbox"/> QRP | <input type="checkbox"/> IRLP/Echolink | <input type="checkbox"/> Other _____ | | | | |
| Interests: | <input type="checkbox"/> Contests | <input type="checkbox"/> DX | <input type="checkbox"/> Antennas | <input type="checkbox"/> Kits | <input type="checkbox"/> Nets | <input type="checkbox"/> Training | <input type="checkbox"/> Skywarn | <input type="checkbox"/> ARES/RACES | <input type="checkbox"/> Foxhunts | <input type="checkbox"/> Hamfesting | <input type="checkbox"/> Other _____ | | |

By signing I agree to abide by the Constitution and By-laws and any other rules and regulations adopted by the Fulton County Amateur Radio Club. I further understand annual dues shall be payable up to the first business meeting in January for the calendar year. The membership year is from January 1 through December 31, except for Life Full Membership.

SIGNATURE: _____ DATE: _____