



Warrensburg Area Amateur Radio Club, Inc.

P.O. Box 1364
Warrensburg, MO 64093-1364



MEMBERSHIP APPLICATION

License Class (circle one)				
N	T	G	A	E

Name: _____ Call: _____

Street: _____

City: _____ State _____ Zip _____ - _____

E-Mail Address: _____

Phone Number: _____ DOB: _____

ARRL Member: Yes No Life Expiration Date: _____

Spouse Name: _____ Call Sign (if applicable): _____

FAMILY MEMBERSHIP INFORMATION:

Name _____ Call Sign (if any): _____ License Class: _____

DOB: _____ Relationship: _____

Name _____ Call Sign (if any): _____ License Class: _____

DOB: _____ Relationship: _____

Name _____ Call Sign (if any): _____ License Class: _____

DOB: _____ Relationship: _____

Name _____ Call Sign (if any): _____ License Class: _____

DOB: _____ Relationship: _____

MEMBERSHIP INFORMATION:		
Annual (Single Rate)	\$ 12.00	_____
Annual (Family Rate*)	\$ 18.00	_____
Life (Single Rate**)	\$250.00	_____
Life (Family Rate**)	\$375.00	_____
***ARRL Membership (Annual)	\$ 39.00	_____
TOTAL:		_____

* Includes all family members living in same household.
 ** No interest payments available (contact WAARCI Treasurer for details)
 *** Applications (available from the WAARCI Secretary) must be completed and submitted with payment.