

Kishwaukee Amateur Radio Club

Membership Application

Send to:

KARC

P. O. Box 371

DeKalb, IL 60115 (or bring it to the monthly meeting)

(Applications are voted on.)

(This is an fillable PDF form. You may fill in the information manually, or with your keyboard. Then print the PDF and send it to the KARC address with your payment.)

Last Name : _____ First Name : _____ MI : _____

Street address : _____

City : _____ State : _____ Zip : _____

Birthday (mm/dd/yyyy) : _____ Year Licensed : _____ License Class : _____

E-mail address : _____

Home phone : _____ Work : _____

Cell phone : _____ Pager : _____

Type of equipment: (check all that apply) ☐ Base ☐ Mobile ☐ Handheld

Band capabilities: (check all that apply) ☐ HF ☐ VHF ☐ UHF

What are your favorite operating modes? (check all that apply)

☐ Voice ☐ CW ☐ Packet ☐ PSK31 ☐ APRS ☐ Other

If you have a base station, can it be operated under standby/ battery power? ☐ Yes ☐ No

Are you a member of the ARRL? ☐ Yes ☐ No

Would you be interested in holding a club office? ☐ Yes ☐ Not Sure ☐ No

What club activities can you help with? (check all that apply)

- ☐ Hamfest
- ☐ Field Day
- ☐ Special Event stations
- ☐ Pumpkin Fest Parade communications
- ☐ March of Dimes Walk
- ☐ Crop Walk

What other skills, licenses, talents do you have that may be valuable to the club?

Applicant's Signature: _____ Callsign: _____ Date: _____

Membership dues:

Individuals \$15.00

Seniors 65 or older and students \$10.00

Family member living in same household \$ 5.00

Reviewed / Approved By:

Init: _____ Date: _____

Init: _____ Date: _____

Init: _____ Date: _____