Kishwaukee Amateur Radio Club Membership Application

Please print, fill out and mail to: **KARC** P. O. Box 371 DeKalb, IL 60115 or bring it to the monthly meeting (Applications are voted on.) Last Name : First Name: MI: Street address _____ Zip:____ State City / Year Licensed License Class Birthday (mm/dd/yyyy) / E-mail address Work: Home phone : _____ 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? No Are you a member of the ARRL? Yes No Would you be interested in holding a club office? Not Sure No Yes 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: Call Sign: Date: Membership dues: Reviewed / Approved B: Individuals Date: _____ \$15.00 Seniors 65 or older and students Init: ____ \$10.00 Date: Family member living in same household \$ 5.00 Init: Date: