

# Amateur Radio Association Of Central California

## Membership Application or Renewal

**Please complete and submit with dues to address below.**

(Check one) New Application: . Renewal of Membership: . Added family member: .

*NOTE: Failure to complete all lines could delay or disqualify your application.*

I pledge to support and abide by the bylaws of **ARACC** as a condition of my membership:

Applicant Signature: \_\_\_\_\_

**Please type or print clearly**

Date: \_\_\_\_\_ Call: \_\_\_\_\_ License (circle one):  E  A  G  T  N

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Spouse's name: \_\_\_\_\_ Spouse's Call: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Bus Phone: ( ) \_\_\_\_\_ Fax Phone: ( ) \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

If you do NOT want an item shared, please indicate which one(s): Home:  Bus:  Fax:  Email:  Cell:

**Please note, we do not sell or permit use of members' names, addresses or phone numbers for non-club or commercial business.**

Check if you are a member of ARRL:  Year first licensed: \_\_\_\_\_ Date Of Birth (mm/dd/yyyy) \_\_\_\_\_

**Please indicate your areas of interest**

Community Service:  Emergency Communications:  Field Day:  Net:  Fund Raising:

Teaching Ham Classes:  Newsletter:  Club Officer:  Hamfest/Swap Event:

Social Events:  RFI/TVI:  Volunteer Examiner (VE):  Technical Assistance:

Publicity/Public Relations:  Satellite Communications:  Contesting:  DXing:

Internet:  Repeater committee:

Other (please describe): \_\_\_\_\_

**To help us serve the membership, please give us the following information:**

Occupation: \_\_\_\_\_ Technical training: \_\_\_\_\_

Other skills that might be of interest: \_\_\_\_\_

Other areas of interest: \_\_\_\_\_

Any other information, comments or suggestions: \_\_\_\_\_

ARACC DUES: \$25.00 for Individual; \$10.00 each for family members living at the same address. List family members below and **fill out a separate application for interests, etc.** NOTE: In all respects, family members are equal to all other members, except where they are classified as Associate Members. Dues are payable in full on January first of each year (with 30 day grace period).

\$ 25.00 \_\_\_\_\_. Additional family members (living at the same address) @ \$10.00 each. \$ \_\_\_\_\_.

Total \$ \_\_\_\_\_. (First time dues, paid in June are one-half the annual rate, i.e., \$12.50/\$5.00, and must be renewed in January).

List Family Members, Call Signs and License Class (if any): \_\_\_\_\_

Make your payment to ARACC via U.S Mail or at any General Meeting of the Association.

Correspondence should be mailed to:

**ARACC**

4473 N. Van Dyke Ave., Fresno, CA 93705

**OFFICE USE ONLY**

# \_\_\_\_\_ Date \_\_\_\_\_ \$ \_\_\_\_\_ Check # \_\_\_\_\_ Intls \_\_\_\_\_ Approved? YES:  NO: