

BRARS Membership Application Form

Blue Ridge Amateur Radio Society, Inc.
PO Box 6751
Greenville SC 29606
<http://www.brars.org>

Card # _____
(For Club Use)

Note: Please include a self photo for the roster and your photo Id card if you have one. If you would like your Id card laminated, please include your signature on a blank white index card.

Name: _____
(First Name) (Initials) (Last Name)

Call: _____ Name you use on the Radio: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers: _____
(Home) (Work)
_____ (Mobile) (Pager)

Email Address: _____

License Class: Novice Technician General Advanced Extra Expiration Date: ___/___/___
(Circle One)

ARRL Member: Yes No Birthday: ___/___/___
(Circle One)

Type of Application:
(Check One)

- | | | |
|--------------------------|------------------------------|---------|
| <input type="checkbox"/> | Full Member | \$20.00 |
| <input type="checkbox"/> | Full Member (over 65) | \$15.00 |
| <input type="checkbox"/> | Family Member of Full Member | \$10.00 |
| <input type="checkbox"/> | Associate Member | \$10.00 |

If accepted, I agree to abide by the Constitution and By-Laws of the Blue Ridge Amateur Radio Society.

Signature: _____ Date: _____
(Applicant)

Sponsors: (Two BRARS Club Members)

Name: _____ Call: _____ Signature: _____
(Print: First MI Last)

Name: _____ Call: _____ Signature: _____
(Print: First MI Last)

Date of Acceptance: _____ Secretary: _____