Membership Application The Purchase Area Amateur Radio Society, Inc.

Last Name:			First Name:		
Call Sign:	Licen	ise Class:			
Mailing Address:					
City:	Sta	te:		Zip:	
Email:					
Preferred Phone:		Other	Phone:		
ARRL Member No: You	es Expires: Associate Mem (Unlicensed)			Youth Member - \$0.00 (Licensed <18 yrs old)	
I pledge to abide by the Article	es of Incorporation, Byla	aws and rule	es of The Pur	chase Area Amateur Radio) Society, Inc
				 Date *******	*****
Accepted as member of The Po	urchase Area Amateur F	Radio Socie [:]	ty, Inc.	 Date	_
Date of Dues/Contributions	Amount	Club Mer	nber Signatu	re	7
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