



# MEMBERSHIP APPLICATION

FILL OUT COMPLETELY, EVEN IF NO  
INFORMATION HAS CHANGED

Date: \_\_\_\_\_

New     Renewal

*Please Print Clearly*

Name: \_\_\_\_\_ Call: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Birthday: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

ARRL Member:  Yes  No

ARES Member:  Yes  No -- Tier 1  Tier 2

License Class: \_\_\_\_\_ Expires: \_\_\_\_\_

First Licensed: \_\_\_\_\_ Joined CARC: \_\_\_\_\_

**Yearly Dues (Jan. 1 - Dec. 31) are payable by the December meeting date.**

\$20.00 Full Voting Membership: Eligible to vote and hold any office.

\$10.00 Associate Membership: Includes, Spouse, Children, Students, and any individual having a bona-fide interest in Amateur Radio, and are Not eligible to vote or to hold office, although they may serve upon any committee to which they may be appointed, as chairman or otherwise.

*Make checks payable to CARC and **pay at a meeting** or mail to:*

Canton Amateur Radio Club  
Treasurer  
P.O. Box 8673  
Canton, OH 44711-8673

Dues Paid: \$ \_\_\_\_\_  Check # \_\_\_\_\_  Cash: Rec Date: \_\_\_\_\_ By: \_\_\_\_\_