



Flagler-Palm Coast Amateur Radio Club, Inc.

Membership Application

Applicant:Name _____ Call _____ DOB _____ ARRL Member Y/N _____
(MM/DD)**Spouse/Partner:**Name _____ Call _____ DOB _____ ARRL Member Y/N _____
(MM/DD)

Type of Membership Applying For: Full/Family Member _____ Associate/Family Member _____ Student _____

Address _____ City/State/Zip _____

Telephone: Home _____ Cell _____ E-Mail _____

Occupation or Retired (From Where) _____ Employer _____

Year of First License _____ Where _____ Current License Class _____ Upgrade Planned? _____

Other Licenses/Calls: Commercial or Other Countries _____

Do you hold any Amateur Radio related Awards? _____ If so, which? *Please list them on back.*

Circle or List club functions are you are interested in supporting e.g. NET NCS, Chair a Committee, VE, Membership, Elmering, Field Day preps, Hospitality, Other _____

Your Station Equipment? HF, VHF, UHF, Satellite, Mobile, Portable, Other _____

AMATEUR RADIO INTERESTS: Circle all that apply, list any others on back.

<u>OPERATING</u>	<u>CONSTRUCTION</u>	<u>BANDS</u>	<u>MODES</u>
Awards	Antennas	HF (10 - 160)	CW
Contests	Towers	WARC	SSB
Field Day	Tranceivers	6 Meters	AM
DX	Amplifiers	VHF	FM
Public Service	Aux. Equipment	UHF	ATV
Traffic Handling	Test Equipment		Digital (List on Back)
QRP	Others (List on Back)		Others (List on Back)
Satellite			
Others (List on Back)			

WOULD YOU LIKE ASSISTANCE WITH YOUR STATION AND/OR ANTENNA SET UP? Y/N _____

Applicant's Signature _____ Date _____

***** DO NOT WRITE BELOW THIS LINE – FOR CLUB USE ONLY *****

Application Received by _____ Call _____ Date _____

Amount of Dues Paid: Cash _____ Check _____ Check # _____ Date _____

FPCARC c/o Richard Visman/NN2T, Secretary-Treasurer
11943 Acosta Road, Jacksonville, FL 32223-1961 Mail2010@Clayvis.com