

Van Wert Amateur Radio Club, Inc.

Application for membership



Renewal ____ New ____

Name _____ Address _____
City _____ County _____ State ____ Zip ____ - ____
Telephone ____ - ____ - ____ Cell phone ____ - ____ - ____
e-Mail _____

Call sign _____ License class _____ Expiration Date _____

Base station bands _____ Emergency Power Yes ____ No ____
Mobile station bands _____
Hand held station bands _____

Training completed:

ARRL Amateur Radio Emergency Communications Yes ____ No ____

Course # _____

FEMA National Incident Management System Yes ____ No ____

Course # _____

Current member ARRL Yes ____ No ____

Receive the club journal, The Open Squelch, via USPS ____ or e-Mail ____

Signature _____ Date _____

Accepted ____ Denied ____ Date _____ Secretary _____

Meeting Date _____