

Membership Application
Zephyrhills Area Amateur Radio Club

Date: _____

Name: _____ Call: _____ License Class: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Birth Date: _____

E-Mail: _____ ARRL Member: Yes () No ()

Year First Licensed: _____ How did you hear about us?: _____

Other Hams in your family (please list) _____

Main interests in Ham Radio (circle applicable):

VHF/UHF HF PHONE CW Digital: PSK RTTY SSTV DX Contests ARES/RACES

Satellite Kit Building Public Service Events Other: _____

Membership year runs from January 1st through December 31st

Dues: \$15.00 single, Family \$20.00

Mail this application or bring it to the next meeting.

(See <http://zaarc.org> for time & date)

Checks payable to **ZAARC**

ZAARC
37432 8th Ave.
Zephyrhills FL 33542