

FORT HERKIMER AMATEUR RADIO ASSOCIATION, Inc. (FHARA)
***APPLICATION FOR MEMBERSHIP ***

Name _____ Callsign _____

Street _____

City _____ State _____ Zip Code _____

Home Phone () _____ - _____ Cell Phone () _____ - _____ Class of License _____

Month & Day of Birth ____ / ____ E-mail Address _____
(Do not give year)

Has the applicant or any party to this application, or any party directly or indirectly controlling the applicant, ever been convicted of a felony by any state or federal court? YES _____ NO _____

ARE YOU A MEMBER OF:

American Radio Relay League Yes ___ No ___

Amateur Radio Emergency Service (ARES) Yes ___ No ___ County _____

Radio Amateur Civil Emergency Service (RACES) Yes ___ No ___ County _____

Other Amateur Radio Club Yes ___ No ___ County _____

If Yes, Please List _____

I, the undersigned, hereby agree to abide by the Constitution and By-laws, as well as all other future rules, of the Fort Herkimer Amateur Radio Association, Inc. (FHARA)

Signature _____ Date _____

This Section For The Organization's Officers Use Only

Membership Type: \$15 Full member [] \$10 Associate []---> (No voting privileges)

Dues Paid \$ _____

1st _____ 2nd _____

Approved Meeting Date ____ / ____ / ____

Presidents Signature _____ Date _____