

ADDITIONAL FAMILY MEMBERS

NAME _____ CALL SIGN _____

AMATEUR CLASS _____ LICENSED SINCE _____ E-mail Address _____

MONTH AND DAY OF BIRTH _____/_____ (do not give year)

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

If Yes Please List _____

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**** ADDITIONAL INFORMATION ****

DUES & ASSESSMENTS PAYMENT RECORD

DATE	AMOUNT	DATE	AMOUNT