



Stones River Amateur Radio Club Membership Application

Application Date: ____ / ____ / ____

Type Of Membership

____ Single Membership (\$20.00) ____ Family Membership (\$30.00)
____ New Member ____ Renewal ____ Please Update My Membership Record

Member Information

Name: _____

Mailing Address: _____

City: _____ State: _____

Home Phone: _____ Cell Phone: _____

Occupation: _____ Work Phone: _____

Email Address: _____

Callsign: _____ License Class: _____

ARRL Member? ____ Yes ____ No

ARES Member? ____ Yes ____ No If Yes, In Which County: _____

VE? ____ Yes ____ No If Yes, With Which Organization(s): _____

Are You A Member Of Other Amateur Radio Clubs: ____ Yes ____ No

If Yes, Which Clubs: _____

Please Tell Us A Little About Other Hobbies, Interests Or Special Training You Have:

Tell Us A Little About Your Station(s)

What Bands Do You Use: ____ 10m ____ 6m ____ 2m ____ 1.25m ____ 70cm ____ 20m ____ 40m
____ 80m ____ 160m Others: _____

What Modes Can You Operate: ____ CW ____ Phone ____ RTTY ____ PSK31 ____ ATV ____ Winlink

Do You Have Emergency Power For Backup Station Operation: ____ Yes ____ No

I Have The Following Functioning Radio Capabilities: ____ HT ____ Mobile ____ Base

Do You Routinely Monitor A 2m or 70cm repeater: ____ Yes ____ No

If So, Which One(s) _____

Additional Member Information

Name: _____

Mailing Address: _____

City: _____ State: _____

Home Phone: _____ Cell Phone: _____

Occupation: _____ Work Phone: _____

Email Address: _____

Callsign: _____ License Class: _____

ARRL Member? Yes No

ARES Member? Yes No If Yes, In Which County: _____

VE? Yes No If Yes, With Which Organization(s): _____

Are You A Member Of Other Amateur Radio Clubs: Yes No

If Yes, Which Clubs: _____

Please Tell Us A Little About Other Hobbies, Interests Or Special Training You Have:

**Please Make Checks Payable To:
Stones River Amateur Radio Club**

SRARC Is An ARRL Affiliated, Special Service Club

ARRL Membership Is Preferred But Not Mandatory

