

GWINNETT AMATEUR RADIO SOCIETY

PO BOX 2481
DULUTH, GA 30096-0043



MEMBERSHIP APPLICATION

- ☐ NEW MEMBER
☐ RENEWAL

TYPE OF MEMBERSHIP (check one)

New Ham: ☐ First Year FREE

Youth (21 and under): ☐ FREE

Adult Family: ☐ 1-YR / \$30.00 ☐ 2-YR / \$55.00 ☐ 3-YR / \$75.00

Senior Family (65+): ☐ 1-YR / \$15.00... ☐ 2-YR / \$25.00... ☐ 3-YR / \$30.00

Life (Adult-Individual): ☐ \$350.00 One-time

Life (Senior-Individual): ☐ \$150.00 One-time (65+)

OPTIONAL DONATIONS

SK Memorial & Education Fund: \$ _____

Scholarship Fund: \$ _____

General Fund: \$ _____

Name: _____ Call Sign: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

ADDITIONAL IMMEDIATE FAMILY MEMBERS (PLEASE USE THE BACK IF NEEDED)

(Enter email addresses below only if your additional family members want to receive the monthly meeting/newsletter announcement emails, and the occasional special announcement emails.)

Spouse Name: _____ Call Sign: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

Add'l Name: _____ Call Sign: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

Add'l Name: _____ Call Sign: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

I agree to abide by the By-Laws of the Gwinnett Amateur Radio Society.

Applicant's Signature: _____ Date: ____/____/____