



JAYHAWK AMATEUR RADIO SOCIETY MEMBERSHIP APPLICATION



Name: _____ Birthday: _____ ARRL Member?: Yes/No
 Call Sign: _____ License Class: _____ Phone Number: _____
 Internet/Email Address: _____

Physical Address

Mailing Address (if different from physical)

| | |
|-------|--|
| Addr1 | |
| City | |
| State | |
| ZIP | |

| | |
|-------|--|
| Addr1 | |
| City | |
| State | |
| ZIP | |

Significant Other's Name: _____

If this is an application for family membership, please list the names, birthdays, call signs, etc. of the other family members:

Name: _____ Birthday: _____ ARRL Member?: Yes/No
 Call Sign: _____ License Class: _____ Phone Number: _____

Name: _____ Birthday: _____ ARRL Member?: Yes/No
 Call Sign: _____ License Class: _____ Phone Number: _____

I agree to abide by the constitution and by-laws of the Club and the other rules and regulations adopted by the Club. I also state that the above information is true.

Signed: _____ **Date:** _____

Dues are \$15.00 for a single membership and \$5.00 for each additional family member. Please either bring your membership dues check (payable to the Jayhawk Amateur Radio Society) to a club meeting or send via mail to:

**Jayhawk Amateur Radio Society
 PO Box 2075
 Kansas City, KS 66102**

DUES PAID BY CHECK #: _____ OR CASH AMOUNT: _____ DATE PAID: _____