



Southwest Missouri Amateur Radio Club
 MEMBERSHIP APPLICATION
 P.O. Box 11363
 Springfield, MO 65808



Name _____ Call _____ Date ____/____/____
 Address _____
 City _____ County _____ State ____ Zip _____
 Home Phone _____ (Other Phone _____)
 License Class _____ or _____ Associate member (no FCC license)
 Email address _____

Check membership level below:

_____ Single membership is \$ 10.00 per year

_____ Family membership is \$ 15.00 per year
(family members in the same home under age 21)

_____ Newsletter by Email or on smarc.org in PDF is Free
(also free to non-members on website)

- _____ I am a current ARRL Member.
- _____ I am an Ares Member.
- _____ I am a Races Member.
- _____ ARRL VE
- _____ W5YI VE

Family members who are licensed amateurs:

Name:	Call:
_____	_____
_____	_____
_____	_____
_____	_____

I would like to have my name and email shared with the various Emergency Preparedness groups in this area. _____ Yes

Please bring or mail this application form to a monthly meeting and give to a club officer. Applications must be accompanied by payment of annual dues.

I would like to donate additional funds \$ _____

Membership # _____