**(License is not required to be a member of our club.)**

**(PLEASE PRINT)**

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ New \_\_\_\_\_\_\_\_\_\_\_ Renewal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Only fill in name/call sign/any changes**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_Zip \_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Call Sign \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expires\_\_\_\_\_\_\_\_\_\_

ARRL Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Month & Day \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your major interests in the hobby?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bands & Modes operated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership: Individual\_\_\_\_\_\_\_ Family \_\_\_\_\_\_\_ If family, include separate application for each individual) - Please enclose annual dues as follows:

Adult: **$15.00**

Age 18 or younger: **$ 7.50**

Family **$32.00** (3 or more individuals of immediate family)

If you have any questions, send to [info@pwarc.com](mailto:info@pwarc.com)

Send this application with your check or money order to PWARC, P.O. Box 7486, Pueblo West, CO 81007