

Tehachapi Amateur Radio Association

P.O. Box 1681
Tehachapi, CA 93581

MEMBERSHIP APPLICATION

YEAR

Date of Application / /

MEMBERSHIP TYPE: <i>(Check all that apply)</i>			
<input type="checkbox"/> New Member	<input type="checkbox"/> Individual \$25.00 / Year	<input type="checkbox"/> Renewal	<input type="checkbox"/> Family \$12.50 / Add'l Family Member / Year

APPLICANT INFORMATION:

Call Sign	License Classification / License Held		
	<input type="checkbox"/> Technician	<input type="checkbox"/> General	<input type="checkbox"/> Extra

First Name	Last Name

Street Address	Apt. / Unit

City	State	Zip Code

Home Phone Number	Cell Phone Number
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E-Mail Address

Background
Have you ever been convicted of a crime (misdemeanor, felony, etc.)? If so, please provide details below:
<input type="checkbox"/> No <input type="checkbox"/> Yes Details: _____

Other Memberships
<input type="checkbox"/> ARRL <input type="checkbox"/> ARES <input type="checkbox"/> RACES <input type="checkbox"/> CERT <input type="checkbox"/> OTHER _____

Family Members in Household <i>(Fill out only if completing a Family Membership)</i>			
Call Sign	Class (T/G/E)	First & Last Name	Age

Amount Paid	Cash / Check	Date	Approval

Applicant Signature: _____ Date: _____