

## AMATEUR RADIO CLUB OF COLUMBIA COUNTY, INC. MEMBERSHIP APPLICATION



A 501(c)3 Organization

## www.ARCCC.org

P. O. Box 285 Evans, GA 30809

2-Meter				
(CITY) (STATE) (ZIP)  Work Phone # Home Phone #  Mobile Phone # Mobile Service Provider  Email Call Sign License Class ARRL Member Yes / No  Birth Date Permission to Publish Your Contact Info to Members Yes /  Amateur Radio activities which you are interested:  (Check all that apply)  HF		(FIRST) (	MI)	(LAST)
Work Phone # Home Phone # Mobile Phone # Mobile Phone # Mobile Service Provider	Address			
Work Phone # Home Phone # Mobile Service Provider Email Call Sign License Class ARRL Member Yes / No  Birth Date Permission to Publish Your Contact Info to Members Yes /  Amateur Radio activities which you are interested:		(STREET)		
Mobile Phone # Mobile Service Provider  Email License Class ARRL Member Yes / No  Birth Date Permission to Publish Your Contact Info to Members Yes /  Amateur Radio activities which you are interested:    (Check all that apply)	_	(CITY)	(STATE)	(ZIP)
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Amateur Radio activities which you are interested:  (Check all that apply)  HF	Call Sign	License Class	ARRL M	ember Yes / No
Check all that apply	Birth Date	Permission to Pu	ablish Your Contact	Info to Members Yes
HF	,		•	ested:
2-Meter   Net Control   Hamfest   Satellite   6-Meter   Public Service   VE   Contesting   10-Meter   Special Events   ARES   APRS   APRS   ARES   APRS   APRS   APRS   ARES   APRS   APRS   APRS   ARES   APRS   APRS   ARES   APRS   AP	ПЕ	•		
G-Meter	HF 2 Motor		•	
### Dispersion of the Image of				
Passe include your dues when submitting this membership application to any member of the Directors or you may pay online by visiting www.ARCCC.org. Membership Applications will viewed and voted on at the next scheduled general club meeting.  I gree that as a member, I will abide by the ARCCC, Inc. Constitution and By Laws and Part 97 of C Rules and Regulations. I acknowledge that to remain a member of the club, I must abide by CCCC, Inc. Constitution and Bylaws.    (APPLICANT'S SIGNATURE)   (DATE)				
commended By ARCCC VE Team	agree that as a member, CC Rules and Regulations	I will abide by the ARCCC . I acknowledge that to r	, Inc. Constitution a	-
commended By ARCCC VE Team	ARCCC, Inc. Constitution a			
es Received: Check # or Cash: Date: By: mments:	_		(DAT	TE)
ded to ARCCC, Inc. Roster on: By: mments:	E COMPLETED BY STAFF ONLY	(APPLICANT'S SIGNATURE)		
ded to ARCCC, Inc. Roster on: By: mments:	COMPLETED BY STAFF ONLY	(APPLICANT'S SIGNATURE)  ARCCC VI	Team Voted I	
mments:	<i>COMPLETED BY STAFF ONLY</i> ecommended By	(APPLICANT'S SIGNATURE)  ARCCC VI Circle if Ap	E Team Voted II	n Date
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	E COMPLETED BY STAFF ONLY  Recommended By  Dues Received:  Treasurer's Signature:	(APPLICANT'S SIGNATURE)  ARCCC VI Circle if Ap	Voted II plicable Check # Date:	n Date
	completed by STAFF ONLY ecommended By ues Received: easurer's Signature:	(APPLICANT'S SIGNATURE)  ARCCC VI Circle if Ap	Voted II plicable Check # Date:	n Date