

THE BILL GREMILLION MEMORIAL RADIO CLUB, INC.

NEWNAN, GEORGIA

ANNUAL MEMBERSHIP APPLICATION

APPLICATION FOR: (CHECK ONE)     NEW             RENEWAL (for the year) 20\_\_\_\_\_

TYPE:  FULL MEMBERSHIP \$30.00 ANNUAL DUES

FAMILY MEMBERSHIP \$5.00 ANNUAL DUES

Family members are those living in the same household of a full member. Licensed family members have all club privileges.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

AMATEUR CALL SIGN: \_\_\_\_\_ CLASS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E MAIL ADDRESS: \_\_\_\_\_

ARRL MEMBER - YES  NO  ARES MEMBER - YES  NO  VEC CERTIFIED - YES  NO

PLEASE LIST ADDITIONAL NAMES AND CALL SIGNS FOR FAMILY MEMBERSHIP

**OPERATOR CLASS:** (N) NOVICE (T) TECH (G) GENERAL (A) ADVANCE (E) EXTRA - ARRL **MEMBER** (Y) YES (N) NO

NAME: \_\_\_\_\_ CALL: \_\_\_\_\_ CLASS: \_\_\_\_\_ ARRL \_\_\_\_\_

NAME: \_\_\_\_\_ CALL: \_\_\_\_\_ CLASS: \_\_\_\_\_ ARRL \_\_\_\_\_

NAME: \_\_\_\_\_ CALL: \_\_\_\_\_ CLASS: \_\_\_\_\_ ARRL \_\_\_\_\_

NAME: \_\_\_\_\_ CALL: \_\_\_\_\_ CLASS: \_\_\_\_\_ ARRL \_\_\_\_\_

BY SUBMITTING THIS APPLICATION I STATE THAT ALL INFORMATION IS TRUE AND CORRECT. I AGREE TO ABIDE BY THE RULES OF THE CLUB'S CONSTITUTION AND BY-LAWS. I ALSO AGREE TO CONDUCT MYSELF IN RESPECT TO OTHERS AND OPERATE MY STATION IN ACCORDANCE TO GOOD AMATEUR PRACTICE.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

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Date Received: \_\_\_\_\_ Initials: \_\_\_\_\_