

# Woodchuck Amateur Radio Club Membership Application

Date: \_\_\_\_\_

**Full Membership \$15**

*(Due by the 4<sup>th</sup> Friday in May)  
(Dues for other full members at the same address are half.)  
(New member dues from Nov. 1 to April 30<sup>th</sup> are half.)*

**Associate Member \$7.50**

*(Member without FCC license)  
(Only full members can vote or hold office)*

Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
ARRL Member:  Yes  No Birthday: Month: \_\_\_\_\_ Day: \_\_\_\_\_  
License Grade: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**RECOMMENDATIONS FOR MEMBERSHIP**

*(Applicant must be recommended by two (2) full members of the Woodchuck A.R.C.)*

Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_  
Comments: \_\_\_\_\_

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Comments: \_\_\_\_\_

**Click on your interests:**

Rag Chewing  Public Service  HF  Voice  Building & Experimenting  
 Field Day  Dxing  VHF  CW  Hamfests  
 Contesting  Award Chasing  UHF  Digital  Packet  
 Other \_\_\_\_\_

***As a member of the Woodchuck Amateur Radio Club, I have read and agree to abide by all of the FCC rules as well as the by-laws of the organization.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(The board of directors reserves the right to refuse any applicant without stated cause.)*

**NAME BADGE REQUEST FORM (Optional - Additional \$4.00 Charge)**

Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_ Location: \_\_\_\_\_  
*(Name or Nickname)*

**Please mail this application and dues to:**

*(Make checks payable to Woodchuck ARC)*

**Woodchuck Amateur Radio Club  
6417 Michael Drive  
Brook Park, OH 44142-3875**

Woodchuck ARC Use Only

Dues Received By: \_\_\_\_\_ Date: \_\_\_\_\_

FCC License Checked:  Yes  No