



Application Form

Application for New Renewed Membership



Name 1: _____ Call _____ License (Circle One): N T G A E ARRL Memb? Y N

Name 2: _____ Call _____ License (Circle One): N T G A E ARRL Memb? Y N

(Family Mems) E-Mail: _____

Summer Address: _____ Winter Address: _____

Summer Phone: _____ Unlisted #? Y N Winter Phone: _____ Unlisted #? Y N

Auto-Dial # _____ Number for Autopatch to Dial (E + F Members below)

Membership (Check One):

- A= Family (\$ 25) All at same Address, up to 2 Licensed Operators
- B= Full (\$ 20) One Licensed Operator. (Voting Membership)
- C= Associate (\$ 15) Limited Mailings, No Vote
- D= Student (\$ 0) Full-time Student. Limited Mailings, No Vote
- E= Family + Autopatch User (\$ 35)
- F= Full + Autopatch User (\$ 30)

Mail Form and Payment to:

Pen Bay ARC
P.O.Box 255
Washington ME 04574-0255