



## The Radio Amateur Society of Norfolk

### Membership application form

Name:		Callsign:
Street address:		License Class:
City, State, Zip:		
Home Phone:	Work or Cell phone:	
Email Address:	ARRL Member Number (if applicable)	
Occupation	ARRL EXP. Date (if applicable)	

Other hobbies/interests:

Do you own?	Check if yes	Brand
HF Rig	Yes <input type="checkbox"/>	
6M Rig	Yes <input type="checkbox"/>	
2M Rig	Yes <input type="checkbox"/>	
1.2M Rig	Yes <input type="checkbox"/>	
70CM Rig	Yes <input type="checkbox"/>	
HT	Yes <input type="checkbox"/>	
PC/MAC	Yes <input type="checkbox"/>	
TNC	Yes <input type="checkbox"/>	
Generator	Yes <input type="checkbox"/>	

Are You Interested in any of the following?			
HF	Check	Above 50 M	Check
packet	Yes <input type="checkbox"/>	6M	Yes <input type="checkbox"/>
RTTY	Yes <input type="checkbox"/>	2 meter	Yes <input type="checkbox"/>
AMTOR	Yes <input type="checkbox"/>	1.25 M	Yes <input type="checkbox"/>
PSK31	Yes <input type="checkbox"/>	APRS	Yes <input type="checkbox"/>
SSB	Yes <input type="checkbox"/>	Packet	Yes <input type="checkbox"/>
CW	Yes <input type="checkbox"/>	Other data modes	Yes <input type="checkbox"/>
NETS	Yes <input type="checkbox"/>	SSB nets	Yes <input type="checkbox"/>
Satellites	Yes <input type="checkbox"/>	CW	Yes <input type="checkbox"/>
		Satellites	Yes <input type="checkbox"/>
		MESH	Yes <input type="checkbox"/>

**Interested in any of the following amateur radio services?**

ARES	Yes <input type="checkbox"/>
SKYWARN	Yes <input type="checkbox"/>

Emergency Contact information:	Application date	
	Dues Paid	
	Approval	
	Member status	

Signature:	Date:
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