

NORTOWN AMATEUR RADIO CLUB 20__ to 20__

MEMBERSHIP INFORMATION (Membership expires annually on July 31ST)

PLEASE PRINT ALL DATA

CALL SIGN: _____ BASIC() BASIC+5() ADVANCED()
LAST NAME: _____ FIRST NAME: _____
ADDRESS: _____
CITY: _____ POSTAL CODE: _____
PHONE: (____) _____ EMAIL _____
RAC MEMBER ____ LIFE MEMBER _____

NORTOWN MEMBERSHIP CLASS:	Donation
Voting Member	\$35.00 () or _____ ()
Voting Student (Attending School full time)	\$10.00 () or _____ ()
Non Voting Auxiliary* or Voting Life Member	_____ ()

* Former or Non members who cannot attend regular meetings but wish to make a donation.

INTERESTS: SWL() HF() VHF/UHF() ANTENNAS() SSTV() PACKET() HOMEBREW() WFAX()

EQUIPMENT: HF: _____
VHF/UHF: _____

WOULD YOU BE WILLING TO PARTICIPATE IN ANY OF THE FOLLOWING CLUB ACTIVITIES?
TEACHING:() FIELD DAY:() EXECUTIVE:() NET CONTROLLER:() SPEAKER() COMMITTEES()

Meeting suggestions:

Please provide two suggestions for a Meeting topic. Also provide any names of possible speakers for the meetings.

If accepted for membership, I agree to abide by the Constitution and by-laws of the NORTOWN Amateur Radio Club.

SIGNATURE: _____ DATE: _____

PAYMENT ENCLOSED: CASH:() CHEQUE:() MAIL OR GIVE THE APPLICATION TO:

**MEMBERSHIP CHAIRMAN
NORTOWN ARC.
P.O. BOX 91104
RPO BAYVIEW VILLAGE
NORTH YORK, ONTARIO M2K 2Y6**