

**Vilas County Amateur Radio Club, Inc.**

**2018 Membership Application**



First Name: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_

Address1: \_\_\_\_\_

Address2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_

Mobile Phone: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

Can we publish your name, call sign and phone number in our club roster? (Yes / No )

Are you an ARRL member? (Yes / No )

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

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

Amount Paid: \_\_\_\_\_

Full Membership	\$15.00/ year
Associate Membership	\$ 6.00/ year
Family Membership	\$20.00 year

Please make checks payable to the Vilas County Amateur Radio Club, Inc.

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PO Box 1141

Eagle River, WI 54521