



## STANISLAUS AMATEUR RADIO ASSOC. MEMBERSHIP FORM

Check One: New Member \_\_\_ Renewing Member \_\_\_ Family Member \_\_\_

NAME: \_\_\_\_\_ CALL SIGN: \_\_\_\_\_

ARRL Member: (Yes) (No)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: Home \_\_\_\_\_, Cell: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### ADDITIONAL FAMILY MEMBERS AT SAME ADDRESS:

NAME: \_\_\_\_\_ CALL SIGN: \_\_\_\_\_ ARRL: {Yes} {No}

NAME: \_\_\_\_\_ CALL SIGN: \_\_\_\_\_ ARRL: {Yes} {No}

**TOTAL DUES PAID:** \_\_\_\_\_ Date: \_\_\_\_\_

(One year membership dues are \$20.00, additional family members in same Household are \$5.00 each)

**Note:** Bring membership form to SARA Meeting or Mail to: SARA Club, P.O. Box 4601, Modesto, CA 95352-4601