



# MVARC Membership Application

NAME: \_\_\_\_\_ CALL SIGN: \_\_\_\_\_  
(FIRST) (I) (LAST)

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

CITY: \_\_\_\_\_ STATE/ZIP CODE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ LAND LINE: \_\_\_\_\_

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

BIRTHDAY: \_\_\_\_\_  
(MONTH / DAY not year)

LICENSE CLASS: TECH [ ] GENERAL [ ] EXTRA [ ] OTHER [ ] VE [ ]

INSTALLED EQUIPMENT: HOME [ ] MOBILE [ ] ECHOLINK [ ] ALLSTAR [ ]

BANDS: VHF 6M [ ] VHF 2M [ ] VHF 1.25M [ ] UHF 70CM [ ]  
HF 10M [ ] HF 12M [ ] HF 15M [ ] HF 17M [ ]  
HF 20M [ ] HF 30M [ ] HF 40M [ ] HF 60M [ ]  
HF 80M [ ] HF 160M [ ]

OTHER: \_\_\_\_\_

ADDITIONAL CERTIFICATIONS: VE [ ] RACES [ ] ARES [ ]  
SATERN [ ] CERT [ ] OTHER [ ]

AMATEUR RADIO AFFILIATIONS: ARRL [ ] MARS [ ]  
OTHER [ ] \_\_\_\_\_

SPECIAL SKILLS / INTERESTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Make check to MVARC, Individual \$24, Family \$36 (pro-rated monthly)**  
**Membership application required for each family member.**  
**Send check and application to: Tim Crowder, C/O Menifee Valley Amateur Radio Club P.O. Box 608, Lake Elsinore, CA 92531-0608**

DATE: \_\_\_\_\_