AARC Membership Application

PO Box 1702

Arlington, TX 76004-1702

Please mail to	above addres	s c/o Treasure	er, or better	yet, join us on the or 3 rd Friday	
AARC NEW	ARC NEW RENEWAL ARRL MEMBER		BER	DATE	
NAME				BIRTHDATE	
CALL		LICENS	SE CLASS _		
ADDRESS					
CITY			ST	ZIP+4	
HOME PH	WORK PH_				
CELL PH		E-mail			
PROFESSION					
Family Informati					
SPOUSE		CALL		CLASS	
BIRTHDATE		WORK	PH		
IRLP privileges are now included with yearly membership.					
AARC annual dues, checks payable to AARC					
Please check applicable membership:					
☐ \$25.00 Individ	lual □ \$:	35.00 Family	☐ \$15.0	0 Associate	
\$25.00 Individual \$35.00 Family \$15.00 Associate New membership (not renewal) after July 1st is prorated at one-half of the annual amount.					
New membership	(not renewal) at	ter July 1st is pi	rorated at on	e-nair of the annual amount.	
☐ \$12.50 Individ	lual 🗆 \$	17.50 Family	☐ \$7.50	Associates	
AMOUNT ENCLOSED WITH APPLICATION					
Monthly Membersh	ip Meeting				
Third Friday, 7:30PM					
Arlington Human Resource Building					
401 West Sanford S	Street				
Arlington, TX					
Talk-in begins @7:00PM 147.140 PL 110.9					