**Medina County Amateur Radio Corporation**

PO BOX 968, Castroville, TX 78009

**Membership Application & Renewal Form**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name:** |  | | | | | | | | | **Call Sign:** | | |  | |  |
| **License Class:** | | | |  | **Exp Date:** | |  | | | **DOB (MMM/DD):** | | | |  |  |
| **Phone:** |  | | | | | | | **Cell:** |  | | | | | |  |
| **Address:** | |  | | | | | | | | | | | | |  |
| **City:** |  | | | | | **State:** |  | | | **Zip:** | |  | | |  |
| **Occupation:** | | |  | | | | | | | | **Retired (Y/N):** | |  | |  |
| **Interests:** | |  | | | | | | | | | | | | |  |
| **E-mail Address:** | | | |  | | | | | | | | |  | |  |
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Use this section for Family Membership accounts only!

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Family Member:** | | |  | | | **Call Sign:** |  | |  |
| **License Class:** |  | | | **Exp Date:** |  | **DOB (MMM/DD):** | |  |  |
| **E-mail Address:** | |  | | | | |  | |  |
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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Family Member:** | | |  | | | **Call Sign:** |  | |  |
| **License Class:** |  | | | **Exp Date:** |  | **DOB (MMM/DD):** | |  |  |
| **E-mail Address:** | |  | | | | |  | |  |
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| **Application Type:** | **New** |  | **Renewal** |  |  |

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| **Membership Type:** | **Individual** |  | $15.00 | **Family** |  | $25.00 |

Note: Make your check payable to MCARC

By signing this application, I hereby agree to strictly adhere to the rules of Amateur Radio both legal, in spirit, and intent, to abide by the by-laws of this organization, and to adhere to proper repeater protocol and radio procedures.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Signature(s)** |  | **Date:** |  | **Add to roster?** |  | **ARRL Member?** |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |