

GWINNETT AMATEUR RADIO SOCIETY

*** SAVE TIME AND MONEY – APPLY ONLINE AT GARS.ORG ***

P.O. BOX 492531
LAWRENCEVILLE, GA 30049



MEMBERSHIP APPLICATION

- NEW MEMBER
 RENEWAL

TYPE OF MEMBERSHIP (check one)

- New Ham: First Year FREE
Youth (21 and under): FREE
Adult Family: 1-YR / \$30.00 2-YR / \$50.00 3-YR / \$60.00
Senior Family (65+): 1-YR / \$15.00... 2-YR / \$25.00... 3-YR / \$30.00
Life (Adult-Individual): \$350.00 One-time
Life (Senior-Individual): \$150.00 One-time (65+)

OPTIONAL DONATIONS

SK Memorial & Education Fund: \$ _____

Scholarship Fund: \$ _____

General Fund: \$ _____

Name: _____ Call Sign: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

ADDITIONAL IMMEDIATE FAMILY MEMBERS (PLEASE USE THE BACK IF NEEDED)

(Enter email addresses below only if your additional family members want to receive the monthly meeting/newsletter announcement emails, and the occasional special announcement emails.)

Spouse Name: _____ Call Sign: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

Add'l Name: _____ Call Sign: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

Add'l Name: _____ Call Sign: _____

Email: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: ____/____/____ (mm/dd/yyyy) ARRL Member (circle one): Yes No Life

I agree to abide by the By-Laws of the Gwinnett Amateur Radio Society.

Applicant's Signature: _____ Date: ____/____/____