



NEWPORT COUNTY RADIO CLUB W1SYE



APPLICATION FOR MEMBERSHIP

- INTERNET VERSION -

NAME:		CALL SIGN:
ADDRESS:	CITY/TOWN:	STATE AND ZIP:
PHONE:	EMAIL (IF ANY):	

WHAT PHASES OF AMATEUR RADIO ARE YOU INTERESTED IN? _____

WHAT IS YOUR PRESENT CODE SPEED? _____ WPM

ARE YOU INTERESTED NET TRAFFIC OR EMERGENCY OPERATION? YES NO

WOULD YOU BE INTERESTED IN AMATUER RADIO CLASSES? YES NO

ARE YOU A MEMBER OF THE ARRL? YES NO

DO YOU PRESENTLY HAVE A STATION ON THE AIR? YES NO

IF YES, WHAT BANDS? _____

By signing and dating this completed application, you are requesting membership in to the Newport County Radio Club. When approved, you agree to abide by the constitution and by-laws of the Newport County Radio Club.

SIGNATURE OF APPLICANT

DATE

PRESIDENT

DATE APPROVED