

FLAGLER PALM COAST AMATEUR RADIO CLUB MEMBERSHIP APPLICATION

FILL IN ALL INFORMATION

NAME _____

CALL SIGN _____

BIRTHDAY _____

MONTH/DAY ONLY

SPOUCE'S NAME _____

SPOUCE'S CALLSIGN _____

SPOUCE'S BIRTHDAY _____

MONTH/DAY ONLY

STREET ADDRESS: _____

CITY/STATE: _____

ZIP CODE: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

ARE YOU AN ARRL MEMBER? _____ YES _____ NO

LICENSE CLASS: _____

SPOUCE'S LICENSE CLASS: _____

MAIL COMPLETED APPLICATION WITH \$30.00 DUES TO:

FPCARC

PO BOX 353698

PALM COAST, FL 32135