



MEMBERSHIP APPLICATION

NEW MEMBER RENEWAL DATE _____

NAME: _____ CALLSIGN: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE#: _____ EMAIL: _____

***DUES:** Annual dues are \$20 for individual membership or \$30 for a family membership (family members living in the same household). Dues expire on June 30th of each year. Donations over and above these amounts are always accepted. PCRC is a tax exempt non-profit organization under IRS rules.*

AMOUNT PAID: \$ _____

NAMES, CALLSIGNS AND EMAIL OF OTHER FAMILY MEMBERS

NAME	PHONE#	EMAIL

ARRL MEMBER: YES NO

Would you be willing to serve on a committee or as a club officer in the future? YES NO

Are you interested in being involved in the Amateur Radio Emergency Services (ARES)? YES NO

What are your special interests in Ham radio? _____

Do you have an area or expertise you would be willing to share with the club? YES NO

SUBJECT: _____

Mail this form with your payment to: **PCRC**
PO Box 991
Bailey CO 80421-0991

CLUB USE ONLY: **MEMBERSHIP LIST** **EMAIL LIST**