K2FCR APPLICATION:

| APPLYING FOR K2FCR CL | UB MEMBERSHIP | |
|----------------------------|--|---------------|
| YOUR NAME | | |
| YOUR ADDRESS | | |
| YOUR CITY, STATE, ZIP_ | | |
| YOUR TELEPHONE | | |
| YOUR E-MAIL (If applicable | e) | |
| YOUR CALL SIGN (If applied | cable) | |
| YOUR LICENSE CLASS (If | applicable) | |
| YOUR LICENSE EXPIRATI | ON DATE (If applicable) | |
| | L OF THE CURRENT RULES ANI CLUB'S CALL AND AGREE WITI | |
| Y or N | | |
| Signature | Your FCC Call (If applicable), | Current Date, |