



Chickasaw Amateur Radio Association

P.O. Box 2
Hernando, MS 38632

Membership Application Form

Application Date ____/____/____

Callsign _____ Class of License _____ Exp. Date ____/____/____

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Publish? Yes ____ No ____

Cell (____) _____ Publish? Yes ____ No ____

Work (____) _____ E-mail _____

Date of your original Amateur License ____/____/____

ARRL Member Yes ____ No ____

*Additional Dues: \$1.00 per additional family member. Permanent address must be the same as the primary member.

Additional family member(s) name and callsign _____

Signature _____ Date ____/____/____

MEMBERSHIP DUES

\$30.00 first member and \$1.00 per each additional family member*

Valid for one calendar year - JANUARY 1 – DECEMBER 31

Make checks payable to:

Chickasaw Amateur Radio Association (C.A.R.A.)

P.O. Box 2

Hernando, MS 38632

Or use PayPal

If you have any questions concerning membership, please contact Ed Thornsburg kf8pd@siscom.net
or Jim Sanders ke5rhm@arrl.net

Office Use Only:

Date Received: ____/____/____

Cash/PayPal/Check # _____

Date Deposited: ____/____/____

Input: _____ Website: _____ Board: _____