Pilgrim Amateur Radio Club



Serving Cape Cod, MA www.pilgrimarc.org





Membership Application / Renewal Form

Date:	Email Address:	
Name:		Call:
License Class:	Expiration Date:	
Additional Family Member	's Name:	
Call:	License Class:	Expiration Date:
Mailing Address:		
City:	State:	Zip:
Home Phone:	Cell Phone	e:
ARRL Member? No	Yes Expiration Date:	
Interests: (Indicate all that	apply)	
Fox hunting Digital Modes Ham Radio Instructor	ARES Field DX / Contests Com Repeaters Hon	Tech Topics C.W. C.W. V.E. V.E.
Other		
I'd be willing to give a pres	entation. Topic:	
Annual Dues: Individual	\$20 Additional Family Member	er \$5 Associate Member \$10
Membership:\$	Repeater Fund Donation:\$	Total:\$
Paid by: Check#	Cash_ PayPal	Date:

Make checks payable to: Pilgrim Amateur Radio Club