

**KINGS POINT AMATEUR RADIO CLUB
APPLICATION FOR MEMBERSHIP**

(PLEASE PRINT)

Last Name: _____ First Name: _____ MI: _____
ARRL Member: Yes _____ No _____ Spouse Name: _____

License Class: _____ Expiration Date: _____ Call Sign: _____
KP/SCC Address: _____

KP/SCC Telephone: _____ Other Telephone: _____
Other Address: _____ City State Zip: _____

Amateur Radio Equipment at Your KP/SCC Location

(circle all that apply)

Fixed Station: HF VHF UHF **Mobile Station:** HF VHF UHF
Portable Station: HF VHF UHF **ARRL Membership:** Yes ___ No ___

Amateur Radio Educational Interest

(circle all that apply)

License Upgrade Licensing Instructor License VE Team

Amateur Radio Operation Interest

(circle all that apply)

HF VHF UHF DX SSB AM FM ATV RTTY PACKET DIGITAL ARES/RACES
QRP Net Control Traffic Handling Experimenting Other: _____

What technical, administrative, or other experience do you bring to the club? _____

Do you have training in: Skywarn, CERT, (FEMA 100, 200, 700), ARRL ECOM, or
other emergency service programs? _____

Would you be willing to serve on committees or as an officer of the club?" Yes No

Applicant's Signature: _____ **Date:** _____

FOR CLUB USE