MEMBERSHIP APPLICATION (Please Print or Type)

GARDEN STATE AMATEUR RADIO ASSOCIATION

NAME _____

PREFERRED FIRST NAME FOR BADGE _____ AMATEUR CALL _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ BIRTH MONTH/DAY _____

E-MAIL ADDRESS _____ PACKET HOME BBS _____

OCCUPATION (even if retired) _____

YEAR FIRST LICENSED _____ PRESENT LICENSE CLASS _____

ACTIVE BANDS AND MODES _____

AMATEUR EQUIPMENT: _____

AMATEUR INTERESTS _____

OTHER HOBBIES or INTERESTS _____

ARRL MEMBERSHIP ( ) YES ( ) NO ( ) LIFE

MEMBERSHIP DESIRED:
( ) ACTIVE (presently licensed)
( ) ASSOCIATE (available to all interested in ham radio)
( ) STUDENT (under 18 pays half of fees and dues)
( ) MILITARY (active duty; pays no fees or dues)
( ) FAMILY (same household as _____)

I, _____ , do express a willingness to abide by the Constitution and
(signature of applicant)
By-Laws of the Garden State Amateur Radio Association. Dated _____

Fees: Initiation fee of $2.00 with this application
Dues: Annual dues of $15.00 with this application and annually at the first of each year ($25.00 for Family).
After June 30, dues of $7.50 for remainder of year ($12.50 for Family).

Mail completed Application with applicable Payment to: **GSARA**
(Checks payable to GSARA) **8 Donner St.**
Holmdel,NJ,07733

========== Do not write below ==========

Payment of $ _____ received. Date _____ Initials _____

Accepted for Membership Date _____ Initials _____