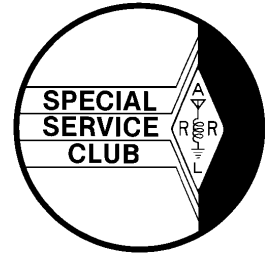




**ACADIANA AMATEUR RADIO ASSOCIATION, INC.**  
**P.O. BOX 51174**  
**LAFAYETTE, LA 70503-1174**  
 a 501(c)(3) Corporation



**\*\*\* APPLICATION FOR MEMBERSHIP OR RENEWAL \*\*\***  
**PLEASE PRINT AND FILL OUT COMPLETELY**

		PRIMARY MEMBER (IM, SM, AM, HLM,	SECONDARY MEMBER (FM, AF, YM)
<b>NAME:</b>			
<b>CALL SIGN:</b>			
<b>LICENSE CLASS:</b>			
<b>MEMBERSHIP CLASS:</b>			
<b>BIRTH DATE/MONTH: (DD/MM)</b>			
<b>ARRL MEMBER: (YES/NO?)</b>			
<b>ADDRESS:</b>	<b>STREET:</b>		
	<b>CITY:</b>		
	<b>STATE:</b>		
	<b>ZIP CODE:</b>		
<b>TELEPHONE:</b>	<b>HOME:</b>		
	<b>CELL:</b>		
<b>E-MAIL ADDRESS:</b>			

All of the above information is requested and/or required to be filled out for a variety of reasons that will benefit both you and the association. This information will help in keeping an accurate club roster. **PLEASE FILL IN COMPLETELY!!!**

**I hereby authorize the officers to use the above information in association publications.**

**SIGNATURE:** \_\_\_\_\_ **APPLICATION DATE:** \_\_\_\_\_

**MEMBERSHIP ANNUAL FEE SCHEDULE**

MEMBERSHIP CLASS	FEE	NOTES
IM - INDIVIDUAL MEMBER	\$20.00	
SM - SENIOR MEMBER (65+)	\$10.00	
FM - FAMILY MEMBER (Spouse only)	N/C	FM must be living in same household as IM or SM.
YM - YOUTH MEMBER	\$6.00	YM must be attending school in 12 <sup>th</sup> grade or lower. First year free.
AM - ASSOCIATE MEMBER (Non-voting)	\$10.00	
AF - ASSOCIATE FAMILY MEMBER (Non-voting)	N/C	AF must be living in same household as AM.
HLM - HONORARY LIFE MEMBER	N/C	
HM - HONORARY MEMBER (Non-voting)	N/C	

**Please make checks payable to the Acadiana Amateur Radio Association or AARA.**

**Dues are due on January 1<sup>st</sup> of each year.** New memberships will be covered under a PRO-RATED system by quarter and initial dues will be adjusted to carry though the remainder of the year. If you have not renewed after the March general meeting your name will be removed from the club roster and email list.

**\*\*\* DO NOT FILL OUT INFORMATION BELOW – FOR OFFICIAL ASSOCIATION USE ONLY \*\*\***

____ UPDATED MAILING LIST – DATE: _____	DATE FILED: _____
____ UPDATED CLUB ROSTER – DATE: _____	AMOUNT PAID: _____
____ ADDITIONAL REMARKS: _____	METHOD PAID: _____
____ PROCESSED BY: _____	