



Tipton Amateur Radio Society

Application for Membership

Complete form and bring to the next meeting or mail to
Tipton Amateur Radio Society, 250 Leonard LN,
Brighton, Tennessee 38011

Current Date: _____

Application Type: ☐ Join ☐ Rejoin ☐ Renewal
Phone Numbers:

Personal Data: (Please Print all Fields)

Name: _____ Call Sign: _____ Home - _____

Address: _____ Work - _____

City: _____ State: _____ Zip Code: _____

E-Mail address: _____ Birthday - _____

Areas of interest: (Check all applicable)

- | | | | | |
|----------------------------------|---------------------------------------|-----------------------------------|---|-------------------------------------|
| <input type="checkbox"/> UHF | <input type="checkbox"/> Packet | <input type="checkbox"/> CW | <input type="checkbox"/> DXing | <input type="checkbox"/> MARS |
| <input type="checkbox"/> VHF | <input type="checkbox"/> Amtor | <input type="checkbox"/> SSTV | <input type="checkbox"/> Experimentation/
Construction | <input type="checkbox"/> DXpedition |
| <input type="checkbox"/> HF | <input type="checkbox"/> RTTY | <input type="checkbox"/> Antennas | <input type="checkbox"/> Field Day | |
| <input type="checkbox"/> VE Team | <input type="checkbox"/> other: _____ | | | |

I am interested in participating in: (Check all applicable)

- ☐ A.R.E.S. Amateur Radio Emergency Radio Service.
☐ R.A.C.E.S. Radio Amateru Civil Emergency Service.
☐ Not interested.

Tipton Amateur Radio Society Annual Dues:

All dues payments are due at the time this application is submitted. The dues period is from 1 January Of the current year and extends to 31 December of the current year. The Family dues rate is designed For licensed immediate family members living in the same dwelling and is not for family members Living at a different address.

Single member dues: \$25.00 Family dues: \$30.00 (List family members below)

Name: _____ Callsign/ Birthday _____

Name: _____ Callsign/ Birthday _____

Name: _____ Callsign/ Birthday _____

Name: _____ Callsign/ Birthday _____

For T.A.R.S. use only, please do not write below this line.....

This form processed by the Secretary / Treasurer and approved by the Board of Directors.

(Signature) _____ Date: _____ ☐ Approved

Renewed for years:

☐ Disapproved