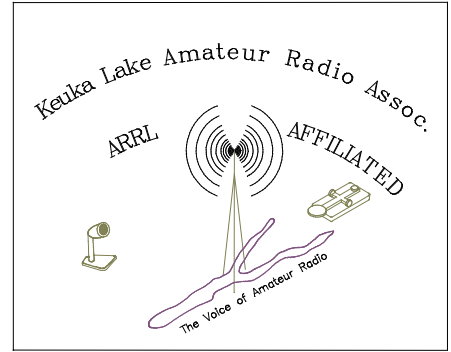


Keuka Lake Amateur Radio Association Membership Application and Membership Renewal Form



Name _____

Mailing Address _____

Physical Address (if different) _____

Call Sign _____ License Class _____ Expires _____

VE Credentials? Y / N ARRL Member? Y / N

Home phone _____

Cell phone _____ Text: Y / N

Email Address _____

Emergency Contact _____

(Name and phone numbers)

For Club Use:
Date _____
Amount Pd _____
Cash/Check _____
For Year: _____
Rec'd by _____
cc: Ass't Webmaster _____
Emer Coordinator _____
Correspond Secy _____

Membership dues support the Keuka Lake Amateur Radio Association: repeater maintenance, equipment updates, website, mailings, etc. Membership dues are \$20 per year (September 1 to August 31). Licensed paid members and their licensed immediate family members living at the same address may vote and/or hold office in the Keuka Lake Amateur Radio Association.

FCC-licensed family members:

Call Sign	Name	License Class	License Expires	Cell Phone/Email

Please make checks payable to: K.L.A.R.A.

Mail to: KLARA Treasurer, P.O. Box 250, Bath, NY, 14810

Please indicate activities in which you are, or may be interested:

- | | |
|--|---|
| <input type="checkbox"/> Monthly programs
<input type="checkbox"/> Repeater maintenance
<input type="checkbox"/> Tower climbing
<input type="checkbox"/> Morse Code operation
<input type="checkbox"/> Echo Link
<input type="checkbox"/> D-STAR
<input type="checkbox"/> RTTY
<input type="checkbox"/> Satellite Communication | <input type="checkbox"/> ATV operation
<input type="checkbox"/> APRS
<input type="checkbox"/> Volunteer communications for events such as:
Wineglass Marathon
WCCB Regatta
Emergency preparedness drills |
|--|---|

Do you have back-up power: Y _____ N _____ If so, what type? _____

Equipment available: Portable _____ Mobile _____ Base _____

Emergency Availability (hours): Day _____ Night _____ Varies _____

In an emergency, are you willing to go mobile? Y / N Your vehicle: 4X4 _____ Pick-up truck _____ Other _____

Your training and/or experience (i.e., Skywarn, Red Cross, FEMA/ICA, medical, firefighter, etc.):
