

Metro-North Railroad Amateur Radio Association Membership Application

www.mnrara.org

mail@mnrara.org

Date: _____ ☐ New ☐ Renewal

PERSONAL INFORMATION

Name: _____ Callsign: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number(s): _____ Email Address(es): _____ / _____

ARRL Member (Yes /No): _____

MNR Trade / Craft: _____ Location: _____

Publish Personal Information on Roster? ☐ Yes ☐ No (Please Check One)

MEMBERSHIP INFORMATION

☐ Active Employee Membership

☐ Retiree Membership

I agree to abide by the Constitution and By-Laws of the Metro-North Railroad Amateur Radio Association, Inc.

Signature: _____ Date: _____

APPLICANT - PLEASE DO NOT WRITE BELOW THIS POINT

Application Received by: _____ Date: _____

Membership Activation Date: _____