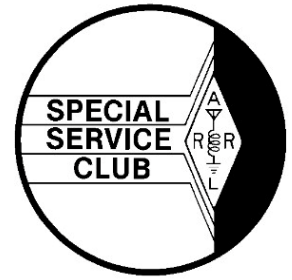




**THE DOWNEY AMATEUR
RADIO CLUB
P. O. Box 207
DOWNEY, CA 90241-0207**



APPLICATION FOR MEMBERSHIP

SERVING DOWNEY
AND SURROUNDING
COMMUNITIES
SINCE 1951

New

Renewal

(PLEASE PRINT ALL INFORMATION)

Name: _____
LAST FIRST MI

License: _____ **DOX: _____
DDMMYYYY

Address: _____
STREET

License Class: _____ **DFL: _____
DDMMYYYY

STREET

DOB: _____ Spouse: _____
DDMMYYYY

CITY STATE ZIP

Email: _____

Home Phone: _____

OK TO PUBLISH RESIDENCE PHONE

Cell Phone: _____

OK TO PUBLISH RESIDENCE ADDRESS

Work Phone: _____

OK TO PUBLISH EMAIL ADDRESS

RADIO RELATED AFFILIATIONS
<input type="checkbox"/> ARRL Member
<input type="checkbox"/> LACDCS/RACES
<input type="checkbox"/> Red Cross
<input type="checkbox"/> SATERN
<input type="checkbox"/> MARS _____
<input type="checkbox"/> Volunteer Examiner _____ <small>LE: ARRL, W5YI ETC.</small>
<input type="checkbox"/> Other _____
<input type="checkbox"/> Other _____

RADIO RELATED INTEREST	
<input type="checkbox"/> Public Service	<input type="checkbox"/> Microwave
<input type="checkbox"/> HF	<input type="checkbox"/> TV
<input type="checkbox"/> VHF/UHF	<input type="checkbox"/> Field Day
<input type="checkbox"/> Contesting	<input type="checkbox"/> EmComms
<input type="checkbox"/> CW	<input type="checkbox"/> Youth Programs
<input type="checkbox"/> Digital	<input type="checkbox"/> Project Kits
<input type="checkbox"/> Vintage Radios	<input type="checkbox"/> Other _____
<input type="checkbox"/> Electronics	<input type="checkbox"/> Other _____

<input type="checkbox"/> I would be interested in editing/writing the Q5 (newsletter)	<input type="checkbox"/> I would be interested in servicing the repeater
<input type="checkbox"/> I would be interested in becoming a club officer	<input type="checkbox"/> I would be interested developing an emergency station
<input type="checkbox"/> I would like to volunteer to help with _____	<input type="checkbox"/> Other _____

FOR OFFICIAL USE ONLY
Received By: _____ Date: _____
<input type="checkbox"/> Cash Amount: _____ Date: _____
<input type="checkbox"/> Check # _____ Amount: _____ Date: _____
<input type="checkbox"/> Other Amount: _____ Date: _____

How did you hear about DARC?

**

DOX - Date of Expiration
DFL - Date First Licensed