



Egyptian Radio Club, Inc. W9AIU

MEMBERSHIP APPLICATION

Your Full Name _____ Your Call _____

Your Address _____ License Class _____

City _____ State _____ Zip _____

Your Home phone _____ Date of Birth ____/____/____

Your email address _____ @ _____

Are you a member of the ARRL? _____ ARES? _____ MARS? _____

If so, give call

Class of membership desired: Full Associate Senior

I hereby apply for membership in the Egyptian Radio Club, Inc. and agree to accept and follow its By-Laws. Further, I agree to operate my Amateur Radio Station in accordance with the Rules and Regulations of the Federal Communications Commission Part 97, of the United States of America.

Signature of applicant _____

EGYPTIAN RADIO CLUB DUES STRUCTURE

\$3.⁰⁰ per month
Payable annually at \$36.00 per year
or quarterly at \$9.⁰⁰ per quarter, in January, April, July, and October.

I am enclosing \$ _____ for my first year dues.

Sponsoring Member _____

Secretary _____ **Dated** ____/____/____