



Tampa Amateur Radio Club Inc.

P.O. Box 11933 Tampa, FL 33680

MEMBERSHIP INFORMATION

Section 1 (General information for publication in club roster)

Name: _____ Callsign: _____

Address: _____ Class: (please circle) N T T+ G A E

City: _____ State: _____ Zip: _____

Phone Number for roster: _____

Primary E-Mail for roster: _____

Section 2 (Additional information for membership records but not for published roster unless you wish)

Permission granted to add to roster: (please circle) YES NO

Alternate Phone: _____ Cell Phone: _____

Alternate E-Mail: _____

Section 3 (General information)

Date of birth: _____ Are you a full time student? (please circle) YES NO

Do you spend 6 months or more out of the Tampa area? (please circle) YES NO

Section 4 (Interests Please circle all that apply)

HF	Emergency Comms	Building	Ragchewing	Elmering
VHF	Digital Modes	Contesting	Nets	VEs
Repeaters	Satellite	DXing	Boat Anchors	Weak Signals

Permission granted to add to roster

_____ Signature	_____ Date	_____ Amount	_____ Cash/Check	_____ Rec'd by
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