

JOHNSTON AMATEUR RADIO SOCIETY, INC.

Standard Application for Membership - Part I

Date: _____

Name: _____

Address: _____

City: State: _____

Home Phone: _____

Work Phone: _____

Ham Call: _____

Zip: _____

License Class: _____

ARRL Member Yes No

List any other valid FCC licenses you possess as well as the type:

_____ (For newsletter)

Check all areas of amateur radio that interest you:

DX Repeaters Traffic Emergency Communications CW Packet

VHF SSB HF SSB OSCAR RTTY Home Brew SSTV

Fox Hunting ATV E.M.E. Rag Chewing UHF Experimenting

Antique Radio Other

What is your main area of interest in amateur radio? _____

How did you find out about JARS? _____

Why do you want to become a JARS member? _____

Are you a former JARS member? Yes No

If yes to previous question, why are you no longer a member?

Standard Application for membership - Part 2

Two types of membership are available in the Johnston Amateur Radio Society- Full and Family Both memberships give you all the privileges, fame and honor that goes along with being a true JARS member. Full and Family members have full user access to the 147.270 Auburn Repeater Corporation repeater and all its many functions including autopatch. You will receive the monthly newsletter, can vote and hold office and you may participate in all JARS sponsored functions. Full and Family members are encouraged to attend at least two meetings per calendar year.

Dues for Full membership are \$30.00 per year. Dues for Family membership are \$35.00 per year.

Initial Dues Schedule

Quarter	Full	Family
Jan – Mar	\$30.00	\$35.00
Apr – Jun	\$22.50	\$26.25
Jul – Sep	\$15.00	\$17.50
Sep – Dec	\$7.50	\$8.75

Initial dues are determined based on which quarter you become a member. This is done so all members' dues expire together. If your application for membership is rejected for any reason, your initial dues payment will be refunded. Dues are not refundable once your application has been accepted and you are "voted in".

Standard Application for Membership - Part 3

This application is for Full ___

Or Family ___

All applications for membership in the Johnston Amateur Radio Society, inc. will be voted on by the club membership.

List two JARS members for references: _____, _____

References are not absolutely required but will aid in your application being accepted by the membership of the JARS. JARS is a very friendly group and references should not be a problem.

A member that is found to be in willful violation of FCC Rules and Regulations regarding the Amateur Radio Service or in willful disregard of the Johnston Amateur Radio Society's Constitution may be suspended or expelled by vote of the membership.

Please accept my application for membership. I have answered all questions truthfully. I have an understanding of, and will abide by the FCC Rules and Regulations regarding the Amateur Radio Service and I am anxious to become a JARS member.

Signed: _____ Date: _____

Please check for initial dues payable to: JARS. Send completed application and initial dues to:

DIANNE YOUNG
208 PHEASANT DR
CLAYTON, NC 27520