

APPLICATION FOR MEMBERSHIP  
GREENWOOD AMATEUR RADIO SOCIETY, INC.  
PO BOX 2404, GREENWOOD, SC., 29646

Name: \_\_\_\_\_

Call Sign: \_\_\_\_\_ Amateur Class: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

Birth Month: \_\_\_\_\_ Birth Day: \_\_\_\_\_

Spouse: \_\_\_\_\_

Birth Month: \_\_\_\_\_ Birth Day: \_\_\_\_\_

Wedding Anniversary Month/Day: \_\_\_\_\_

Additional Family Members

Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_

Address: \_\_\_\_\_

Are you a current ARRL Member? Yes No

Is this application a renewal membership? Yes No

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsored by: \_\_\_\_\_