CHEHALIS VALLEY AMATEUR RADIO SOCIETY

MEMBERSHIP APPLICATION

Dues: $25 a year for families living in the same home: $___25.00

☐ Newly licensed (2-year membership for the price of one.)

BAW FAW Repeater (suggested donation $25.00): $_____

CVARS name badges are available ($15.00 each): $_____

Total paid: _____

Please print clearly:

Date: ____/____/_____ Name: _____ Call sign: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ E-mail address: _____

(CVARS communicates meeting and event information to the membership primarily through email)

License Class: ☐ None ☐ Novice ☐ Technician ☐ Tech Plus ☐ General ☐ Advanced ☐ Extra

Other family member: _____ Call sign: _____

License Class: ☐ None ☐ Novice ☐ Technician ☐ Tech Plus ☐ General ☐ Advanced ☐ Extra

Organization Memberships: ☐ ARRL ☐ ARES ☐ Skywarn ☐ Other _____

Club Activities (check all that you may be interested in assisting with)

ARRL Field Day: ☐ Attend ☐ Operate ☐ Set up ☐ Clean up ☐ Organize

Public service: ☐ Bike rides ☐ Parades ☐ Road races ☐ Special Olympics ☐ Seafair

Misc. functions: ☐ Flea Market ☐ Picnics ☐ Banquets ☐ Other: _____

Please call me — I would like to help on the following committee(s):

☐ Technical / special interest ☐ Public service ☐ Education / training

☐ Strategic planning ☐ Audit ☐ Facilities / planning

What are your radio interests/equipment:

_____

_____

Submit this application with payment to the Club Treasurer at any regular membership meeting or mail to: CVARS, PO Box 1281, Chehalis, WA 98532.

Dues are for a calendar year and due by February of the new year.

Signature of applicant: _____

Club Use Only

Date received: _____/_____/_____ Date reviewed: _____/_____/_____

Date membership cards issued: _____/_____/_____

☐ Membership card ☐ Constitution and Bylaws

Revised 02/05/2025