

# LWRA MEMBERSHIP FORM

VHF Repeater 147.330/930 - PL Tone 127.3 UHF Repeater 442.425/447.425 – PL Tone 127.3

Dues Period, Jan 1—Dec 31 of current year Dues = \$24.00 per year, per member

\* \*(Addl. Family Members in household=\$12.00 each on application(s) attached to this form  
please note that dues are \$6.00 per calendar quarter, payable annually).

(No individual is required to hold an Amateur Radio License for membership eligibility)

Call sign \_\_\_\_\_ Class of License (check one) Technician \_\_\_\_\_ General \_\_\_\_\_ Extra \_\_\_\_\_

Name \_\_\_\_\_

(Please print)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

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

ARRL Member: Yes \_\_\_\_\_ No \_\_\_\_\_

I herewith apply for membership in LWRA, Inc. and submit full payment for dues for the current membership term. By placing my signature below, I agree to abide by all by-laws and governing documents of the organization that are in effect during the term of my membership.

(Signature)

X

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Date: \_\_\_\_\_

Dues may be paid by mail, at address below, or to the Treasurer at a regular meeting:  
Please make checks or Money Orders payable to LWRA, Inc.

LWRA, Inc  
P.O. Box 54  
Lake Wales, FL 33859

07/10/2015