## FOOTHILLS AMATEUR RADIO SOCIETY

## Box 1806 Okotoks, Alberta T1S 1B6

Please note that fees are due January 1.

Please make cheques payable to: Foothills Amateur Radio Society



## Please complete all of the pages, and sign on Page 3 Type of Membership: Date: New Renewal **YOURSELF** RAC Membership Number: \_\_\_\_\_ Name: Callsign(s): Address: Town / City: \_\_\_\_\_\_ Postal Code: \_\_\_\_\_ Home: \_\_\_\_\_ Mobile: \_\_\_\_ Emergency: \_\_\_\_ Phone: E-mail Address: **SPOUSE / FAMILY MEMBER** RAC Membership Number: \_\_\_\_\_ Callsign(s): \_\_\_\_\_ Name: Home: \_\_\_\_\_ Mobile: \_\_\_\_ Emergency: \_\_\_\_ Phone: E-mail Address: MEMBERSHIP DUES Single Membership .......\$35.00 per year Family Membership .......\$45.00 per year Associate Membership (No voting rights) .......\$22.50 per year Student Membership (No voting rights)......\$22.50 per year **EXTRA DONATIONS TO ASSIST WITH:** Repeater maintenance / Upgrades **Emergency Communication** Club Station Educational Workshops / Classes / Reference Materials

TOTAL AMOUNT ENCLOSED

BANDS / MOD	DES YOU ARE ACTIVE ON:					
160 m	15 m		SSB			
80 m	12 m		AM			
40 m	10 m		FM			
30 m	6 m		CW			
20 m	2 m					
17 m	70 cm					
ARE YOU ABLE TO ASSIST WITH:						
	Emergency Communications	Yes	Maybe	No		
	Field Day	Yes	Maybe	No		
	Repeaters	Yes	Maybe	No		
	Nets	Yes	Maybe	No		
ADDITIONAL (	COMMENTS:					

## HOW MY PERSONAL DATA FROM THE FARS MEMBERSHIP FORM MAY BE USED

You may circulate to other	members my:					
Name						
Address						
Home Phone						
Mobile Phone						
Emergency Phone						
E-mail Address						
Callsign						
You may circulate to ARES	mv	You may post on the FAF	25 website my:			
Name	illy.	Name	is website my.			
Address		Address				
Home Phone		Home Phone				
Mobile Phone		Mobile Phone				
Emergency Phone		Emergency Phone				
E-mail Address		E-mail Address				
Callsign		Callsign				
Cansign		Calisign				
You may provide emergen	cy communication	s information to those wh	o might			
require ARES services (RCMP, town officials, emergency services, etc.) my:						
Name						
Address						
Home Phone						
Mobile Phone						
Emergency Phone						
E-mail Address						
Callsign						
I HEREBY APPROVE OF MY P	ERSONAL INFORMAT	TION BEING USED FOR THE	PURPOSES			
IDENTIFIED ABOVE.						
Name:		Da	te:			
Signature:						