



Rowan Amateur Radio Society

c/o Doug Bowers, Secretary

700 Mt.Vernon Rd.

Woodleaf N.C. 27054



Membership Application

Name & Call _____ Class _____ ARRL Member? _____

Street Address _____

City, State, Zip _____

Phone: Home _____ Cell _____ Email _____

Please write a short history of your Amateur Radio life (How it began, when first licensed, events since that time, present equipment, etc.) _____

Describe your general operating habits (ie favorite bands, modes, time of day, hours/week, etc.) _____

What frequencies/modes, other than those listed above, are you able to use? _____

What are your capabilities/limitations in case you were called on for an emergency operation? _____

Name three goals you have in Amateur Radio _____

List, in order of enjoyment, three Amateur Radio activities that you would like to do in the next six months _____

Received by: _____ Date: _____ Paid: _____ Date: _____