



# NORTH OKALOOSA AMATEUR RADIO CLUB



## APPLICATION AND DATA FORM

Mail To: Bob Murphy  
1457 LIVEOAK ST  
NICEVILLE, FL 32578

*Note to joining members, to insure our database is correct.*

*Please fill out this form despite an entry in previous year's roster. Thank you.*

**\*\*\*\*Please Print\*\*\*\***

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

Check if you do not want your information on the roster \_\_\_\_\_

Check if you wish to receive club information via emails \_\_\_\_\_

E-mail address: \_\_\_\_\_

Membership:  Full Membership \$20.00  Associate (Non-Voting Member) \$12.00

New Licensee (Free until year's end)

Amount enclosed: \_\_\_\_\_  Cash  Check No. \_\_\_\_\_

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

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

Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Spouse Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_ E-mail: \_\_\_\_\_

Personal Web Page \_\_\_\_\_ Add to NOARC page \_\_\_\_\_

License Renewal Date: \_\_\_/\_\_\_/\_\_\_ ARRL Member: Yes \_\_\_ No \_\_\_

*Please return this page with your payment.*

*Please put your call sign on the check: Please make check payable to*

*North Okaloosa Amateur Radio Club*