



Trident Amateur Radio Club (TARC) MEMBERSHIP APPLICATION

(Please Print)

*Trident Amateur Radio Club
P.O. Box 60732
N. Charleston, SC. 29419*

*Date: _____ *Call Sign: _____

*Name: _____

*Address: _____

*City, State & Zip _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Beeper: _____

*Email: _____

*License Class: _____ Year Licensed: _____

ARRL Member: Yes () No ()

If this is a Family Membership, please list all members and their call signs:

Please check off the items below that are of interest to you:

2M ()	6M ()	HF ()	ATV ()	CW ()
RTTY ()	APRS ()	PSK31 ()	Other Digital ()	
Traffic Nets ()	SkyWarn ()	Repeaters ()	Rag Chew ()	
Satellites ()	Field Day ()	JOTA ()	Contesting ()	

Please list any other Hobbies or interests: _____

Are you available during Emergency Situations: Yes () No ()

Date Membership Approved by Club: _____

Dues Paid

* Required Field