

TOLEDO MOBILE RADIO ASSOCIATION

[WWW.TMRAHAMRADIO.ORG](http://WWW.TMRAHAMRADIO.ORG)

MEMBERSHIP APPLICATION / RENEWAL FORM

PLEASE PRINT OR TYPE

Type of Application       NEW       RENEWAL

Type of Membership:     REGULAR     FAMILY       STUDENT     COMPLIMENTARY

Date of birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ ARRL Member?     YES     NO    If yes, when does it expire? \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ CALL: \_\_\_\_\_ CLASS \_\_\_\_\_  
(N,T,G,A,E)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP-CODE \_\_\_\_\_ - \_\_\_\_\_ (+4 zip if known)

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
 OK to put on membership roster       OK to put on membership roster

E-MAIL ADDRESSES: \_\_\_\_\_  
 OK to put on membership roster

**IF  BOXES ARE CHECKED, THE INFORMATION IN PHONE AND E-EMAIL WILL BE SHARED.**

COMPLETE THE FOLLOWING IF YOU ARE APPLYING / RENEWING FOR A FAMILY MEMBERSHIP – SAME HOUSEHOLD

SPOUSE NAME \_\_\_\_\_ CALL \_\_\_\_\_ CLASS \_\_\_\_\_

CHILD NAME \_\_\_\_\_ CALL \_\_\_\_\_ CLASS \_\_\_\_\_

CHILD NAME \_\_\_\_\_ CALL \_\_\_\_\_ CLASS \_\_\_\_\_

CHILD NAME \_\_\_\_\_ CALL \_\_\_\_\_ CLASS \_\_\_\_\_

I DO     I DO NOT - hold a valid Federal Communication Commission Amateur Radio License with the above listed call sign and operator privileges. I agree to abide by all the rules, regulations, and adopted policies of the Toledo Mobile Radio Association, Inc. I understand the Membership year is from January 1<sup>st</sup> through December 31<sup>st</sup>. **Dues are Currently \$20.00 per year.** Each additional Family Member is \$5.00 per year and that Family member must be living in the same household. Any full time student is \$5.00 per year. Dues are to be paid by January 1st of each calendar year, and there is no pro-ration except for new members joining after August 31<sup>st</sup>. For new members joining during the last four (4) months of the year, dues are \$25.00 to cover the remainder of the year plus all of the next year.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Would you like to receive a Membership card?     YES     NO**

Please make your check payable to T.M.R.A. Mail it along with the new or changed application form to:

Rita Baker, WB8FBG  
TMRA  
P.O. Box 66133  
Newport, MI 48166-0133

Membership Information: 734-755-9936  
Membership E-Mail: [membership@tmrahamradio.org](mailto:membership@tmrahamradio.org)  
TMRA Website: [WWW.TMRAHAMRADIO.ORG](http://WWW.TMRAHAMRADIO.ORG)

The TMRA respects your wishes. The above information is needed to update and maintain the club roster and administrative records. All unchecked information is held in strictest confidence. No new application will be processed without this completed form.

**CLUB USE ONLY** YEAR \_\_\_\_\_  
Card # \_\_\_\_\_ Date Paid \_\_\_\_\_  
Paid through \_\_\_\_\_ By-laws sent \_\_\_\_\_  
- Cash vs Check # \_\_\_\_\_ Card sent \_\_\_\_\_  
- Roster sent \_\_\_\_\_ Info sent \_\_\_\_\_

Why did you become a ham?

What are your main interests?

Please tell us, so the TMRA may have programs of interest to the members.