



## Fauquier Amateur Radio Association Membership Application Form

Date of Application \_\_\_\_\_

What type of Membership are you interested in? (Please Circle One)      Regular      Family

First and Last Name of Applicant \_\_\_\_\_

Other Names for Family Memberships \_\_\_\_\_

Your Callsign (if you have one) \_\_\_\_\_ License Class \_\_\_\_\_

Year First Licensed \_\_\_\_\_ ARRL Member?    Yes    No    Ever a member of FARA before?    Yes    No

Name For Name Tag (Nickname) \_\_\_\_\_

Your Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Phone Number \_\_\_\_\_ This is your    Home    Cell    Business

Email Address (important) \_\_\_\_\_

Home Station Capabilities:    HF    6m    2m    440    900    1200

Mobile/Portable/HT Capabilities \_\_\_\_\_

Current Interests (DX, Contests, ARES, Nets, etc: \_\_\_\_\_

Awards or Noteworthy Achievements \_\_\_\_\_

**Please complete the form and either bring it with you to the next club meeting, or mail it to the club at:**

Fauquier Amateur Radio Association  
P.O. Box 752  
Warrenton, VA 20188