

APPLICATION for MEMBERSHIP

I
(Christian Names) (Surname)

(Address).....
(No) (Street Name)

.....
(Suburb/Town) (State) (Post Code)

Call Sign(if any)..... Phone Number

Email Address

If less than 18 Years of age state Date of Birth /..../

Hereby apply to become a Full member of the **BORDER RANGES AMATEUR RADIO CLUB Inc.**

In the event of my admission as a member, I agree to be bound by the rules of the association

**And I also agree to pay the yearly Membership Fee as defined in the associations
Schedule of Fees**

Payment with application or Online Banking BSB: 084-927 Account No 535-582-782 Ref of Your Name

Signature of Applicant..... Date.....

Proposed by..... Signature..... (Date)...../...../.....
(Please Print Name)

Seconded by..... Signature (Date)...../...../.....
(Please Print Name)

If you are a W.I.A. Member please indicate **yes/no**

Application to be approved by the members of **B.R.A.R.C Inc.**

Date of Approval/...../..... Secretary's Signature

**Post to: The Secretary, Border Ranges Amateur Radio Club Inc.
c/- 205 Pratten Street, Warwick, QLD, 4370**