Midland Amateur Radio Club

PO BOX 1049, Midland, MI 48641

Membership Application & Renewal Form

Name: _____ **Call Sign:** _____

License Class: _____ **Exp Date:** _____ **DOB (MMM/DD):** _____

Phone: _____ **Cell:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Occupation: _____ **Retired (Y/N):** _____

Interests: _____

E-mail Address: _____

Use this section for Family Membership accounts only!

Family Member: _____ **Call Sign:** _____

License Class: _____ **Exp Date:** _____ **DOB (MMM/DD):** _____

E-mail Address: _____ **Cell:** _____

Family Member: _____ **Call Sign:** _____

License Class: _____ **Exp Date:** _____ **DOB (MMM/DD):** _____

E-mail Address: _____ **Cell:** _____

Application Type: **New** ☐ **Renewal** ☐ **Want to join ARES** ☐

Membership Type: **Individual** ☐ $20.00 **Family** ☐ $25.00

Note: Make your check payable to: **MARC**

By signing this application, I hereby agree to strictly adhere to the rules of Amateur Radio both legal, in spirit, and intent, to abide by the by-laws of this organization, and to adhere to proper repeater protocol and radio procedures.

	Signature(s)	Date:	Add to Roster?	ARRL Member?
1				
2				
3				

Emergency Contact (Name and Number) _____

Ver: September 2026