Central Coast Amateur Radio Club (inc) Membership Application

Period: 2024 to 2025

Given Name					Family Name			
Callsign/s								
Tick here if you do not wish your contact details to be published								
Tick here if you wish your photograph not be used								
Contact De	tails							
Email					Phone			
The followithe CCARO	_	necessary	for proper fund	ctionir	ng of CCAR	C and w	vill be kept in fu	ıll confidence by
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Next of Kin Residence Contact Do (Shift-Enter for	etails							
Other Affiliations (Please Tick) WIA				☐ ARNSW		☐ WICEN		
CCARC O	ffice Data							
Membership Status (Full, Life, Associate, New, Distant, O'seas)								
Acceptance Date								
Payment Amount								
Payment Method Bank Transfer								
			Ca	sh				
Signature						Date		