



Application for Membership

I wish to become a member of PART upon approval of the Board of Directors. I agree to abide by the Articles of Organization and the WB1GOF Repeater Rules of Conduct, which may be amended by the Board of Directors of this organization. I wish to () renew or () join as:

A voting member who must have an Amateur Radio license.

- () Full Member - \$25.00/year.
- () Family Membership - \$30.00/year. All household Amateur Radio licensees may vote.
- () Student or () Senior Citizen Member - \$15.00/year.

A non-voting member not currently licensed.

- () Associate Member - \$ 10.00/year. Associate Members may not hold an office within the PART organization.

() \$ _____ Donation to the repeater fund (Membership not required).

Name _____ Call Sign _____

Address _____

City _____ State _____ ZIP _____

Telephone _____ () Work () Home () Cell

E-mail Address _____

Are you an ARRL Member? () Yes () No () Once upon a time () Life member

First time PART member? () Yes () No

Signed _____ Date _____

Bring this completed application to a PART monthly meeting with cash, or a check made out to "PART of Westford"; or mail the form with a check to:

PART of Westford
P.O. Box 503
Westford, MA 01886-0015