

**OZONE AMATEUR RADIO CLUB**  
**P. O. Box 553, Slidell, LA 70459**  
**Membership Application**

Call Sign \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

House No. \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ Phone (W) \_\_\_\_\_ Cell \_\_\_\_\_

ARRL Member (circle one) Yes / No      Email Address: \_\_\_\_\_

Family members (Names and call signs if available) \_\_\_\_\_

Do you want to be included on the email list? (circle one)      Yes / No

If there is any of this information that you do not wish to have included in the club directory, indicate on the back of this form.

Place an "X" to indicate bands/modes you can operate.

MODE	160	80	60	40	30	20	17	15	12	10	6	2	220	440
SSB														
CW														
DIGITAL														
FM														
MOBILE														
PACKET														
D-STAR														

If operating packet, call sign of your home BBS and/or PBBS \_\_\_\_\_

Can you operate during emergency conditions? (circle one)      Yes / No

I hereby apply for new/renewal membership in the Ozone Amateur Radio Club, Inc. as set out in the following: I understand that this application is subject to the approval of the club membership, and I agree to abide by the Constitution and By-Laws of the organization. **This application must be presented in person at an O. A. R. C. business meeting (first Thursday of each month).**

Signed \_\_\_\_\_

Application for:

- { } Regular membership (\$25.00) \_\_\_\_\_
- { } Family membership (two) (\$30.00) \_\_\_\_\_
- { } Additional member (\$6.00) \_\_\_\_\_
- \_\_\_\_\_ TOTAL

\_\_\_\_\_  
Treasurer