

CITRUS BELT AMATEUR RADIO CLUB W6JBT

P.O. Box 3788 San Bernardino, CA 92413 Email: INFO@W6JBT.ORG



SUPPORTING EMERGENCY COMMUNICATIONS FOR STATE, COUNTY AND CITY

Membership Application and Emergency Radio / Equipment Questionnaire		
Personal Information:		
Name:	Callsign:	Class:
Address:		
City:	State:	Zip:
Phone Number: () Email Addres	SS:	@
Additional Information:		
Are you a member of any of the following groups or organizations? (sel	lect all that apply)	
A.R.R.L. NTS ARES RACES (Unit) _		ACS (Unit)
MARS (Branch) CERT		
Do you have capabilities of any of the following? (select all that apply)		
VHF/UHF HF ATV RTTY	AMTOR	PACTOR SSTV SSB
CW PSK31 Satellite EME	Other	None
Communication Group Sign-up:		
they draw near. This list also will be used as a contact point if radio operators and <u>NOT</u> an outside source, you will not receive emails that do not pertain to group, you can unsubscribe at any time by sending an email to the address s Would you like to sign-up for our communication group? YES If YES, please provide the email address at which you would like to receive the Email: @	the radio community a shown on the top of this NO he information.	and/or our radio club. If you elect to sign-up for this application and request to be removed from the list.
Club Newsletter: The Citrus Belt Amateur Radio Club is now sending their monthly new to you, please supply an email in which you would like your newsletter		, if you agree to allow us to send our newsletter
Please deliver my newsletter to this email address:		
Email: @		
Donation for our Repeaters:		
Citrus Belt Amateur Radio Club owns and operates a Two Meter repeater an These systems operate 24 hours a day 7 days a week for our members. We If you would like to make a donation, please indicate the amount on the repea	need donations to help	with equipment maintenance and operating costs.
Membership: ALL dues are to be paid July 1 of each year. New member	s will have their dues	pro-rated by the yearly quarter they join.
Please include this application when renewing dues or joining the club.		,
Please indicate your choice of membership		
Single Membership \$20.00/Year Family Membersh	nip \$25.00/Year	Student Membership \$10.00/Year
Repeater Donation please specify the amount of you	· —	•
All fees and donations must be included with this application. This application can be mailed to the address at the top of the page or hand		
Record (For Club Use Only):		
Membership Paid \$ Donation Amount	t \$ [Date of dues paid:
Payment Method: CHECK CASH Communication Group		IO Information sent to PIO YES NO