

FCARC Membership Information : Individual \$30 Family \$40

Please provide the following information when joining or renewing your membership.

Call Sign: _____

Name: _____

Address: _____

Phone Number(s)

Home: _____ **Work:** _____

Cell: _____

Email: _____

ARRL Member: YES NO

Optional info:

Spouse name and callsign (if applicable): _____

Child(s) name and callsign (if applicable)

Checks payable to: FCARC

Mail to: FCARC, 805 Glynn St S, Suite 127 #313, Fayetteville, GA 30214