



St. Augustine Amateur Radio Society Membership Form

Date:

Call:

License Class:

Member ARRL {Y/N}

Name:

Tele. No.:

Address:

City:

State:

Zip:

E-Mail Address:

Membership dues are \$20.00 per calendar year.

Make Checks payable to SAARS. Print form and mail with check to:

St. Augustine Amateur Radio Society

ATTN: Membership

PO Box 840244

St Augustine, FL 32080