

# GREEN MOUNTAIN REPEATER ASSOCIATION

146.61 K3GMR Bladensburg, MD **GMRA** 146.88 W3GMR Greenbelt, MD

## NEW MEMBERSHIP APPLICATION

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Call: \_\_\_\_\_

Address: \_\_\_\_\_ License Class: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ (+4) \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Work: \_\_\_\_\_

E-Mail Address: (please print clearly) \_\_\_\_\_

1. Are you an ARRL member? Y \_\_\_ N \_\_\_  
If you are not a member of **ARRL** and would like to Join through GMRA Check here \_\_\_ and we will send you the necessary form.
2. Occupation (optional for statistical reasons) \_\_\_\_\_
3. For no additional cost, list family members (Tech Class or higher) at the same address who would like to join **GMRA**:

Name: \_\_\_\_\_ Call: \_\_\_\_\_ Class: \_\_\_\_\_

Name: \_\_\_\_\_ Call: \_\_\_\_\_ Class: \_\_\_\_\_

I, the undersigned licensed amateur radio operator (Technician class or higher), hereby request membership in the Green Mountain Repeater Association, Inc. I agree to abide by the operating rules and bylaws of the association.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Family Member Signature*

\_\_\_\_\_  
*Family Member Signature*

**Equipment Fund Donation: \$5 \_\_\_ \$10 \_\_\_ \$20 \_\_\_ \$35 \_\_\_ \$50 \_\_\_ \$ other \_\_\_\_\_**  
(To Build a better GMRA)

**Annual Dues only \$30.00      Total Amount Enclosed \$ \_\_\_\_\_**

**Make Check payable to GMRA**

Green Mountain Repeater Association, Inc.  
P.O. Box 572  
Bladensburg, Md 20710-0572