

# Overlook Mountain Amateur Radio Club

PO Box 180, West Hurley, NY 12491

## Membership Application



I wish to apply for membership in the  
Overlook Mountain Amateur Radio Club.

Today's date: \_\_\_\_\_

Individual membership (voting) ..... \$ 35 per year \_\_\_\_\_  
Family membership (per household, each member voting). .... \$ 45 per year \_\_\_\_\_  
Senior (65 or older, voting) ..... \$ 30 per year \_\_\_\_\_  
Total Enclosed ..... \$ \_\_\_\_\_

Make check payable to: OMARC and deliver with completed application to any club officer or mail to: OMARC, PO Box 180, West Hurley, NY 12491

### Personal Information:

Name: \_\_\_\_\_ Call Sign: \_\_\_\_\_ License Class: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you a member of the ARRL? YES \_\_\_\_\_ / NO \_\_\_\_\_

Sponsoring OMARC member (Optional) : \_\_\_\_\_ Call Sign: \_\_\_\_\_

### Operating Interests: (check all that apply)

HF: CW \_\_\_\_\_ SSB \_\_\_\_\_ PSK31 \_\_\_\_\_ FT8/FT4 \_\_\_\_\_ SSTV \_\_\_\_\_ POTA \_\_\_\_\_ AM \_\_\_\_\_ Other Digital Modes \_\_\_\_\_ Exotic Propagation \_\_\_\_\_

VHF/UHF: FM \_\_\_\_\_ Satellite \_\_\_\_\_ AM/SSB/CW \_\_\_\_\_ Digital Voice \_\_\_\_\_ APRS \_\_\_\_\_ Mesh \_\_\_\_\_ Other: \_\_\_\_\_

### What club activities may you be interested in? (Check all that apply)

Serving on a committee _____	Field Day _____	Fox Hunts _____	Community Service _____
Emergency Communications – ARES / RACES _____	Hamfests _____	Internet Technology _____	
Teaching Amateur Radio Courses _____	Volunteer Examiner _____	Other _____	

## Membership Agreement

**All applicants are required to sign this form indicating their willingness to abide by this membership agreement.**

I agree to abide to the constitution and by-laws of the Overlook Mountain Amateur Radio Club. I further agree to abide by all FCC rules and procedures as well as the directions of the station trustee and/or control operators designated by the club pertaining to the use of repeaters or other club equipment. I understand that the WA2MJM repeaters are operated for the convenience of members and that there is no guarantee of their availability at any given time. Additionally, I understand that repeated and or major infractions of any of the above agreed to stipulations will potentially result in loss of membership in the club and forfeiture of any dues paid.

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

**Additional "Family Membership" Applicants must complete their own application to be voted on separately.**

**New membership is contingent upon approval by a vote of the membership.**

**DO NOT WRITE BELOW THIS LINE. FOR OFFICIAL USE ONLY.**

Date Dues Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Received By: \_\_\_\_\_ Call Sign: \_\_\_\_\_