

Sierra Intermountain Emergency Radio Association, Inc.

P.O. Box 2348

Minden, NV 89423

Attn: Membership Chairman

NEW MEMBERSHIP AND RENEWAL APPLICATION

NOTE: ALL ITEMS MARKED WITH AN ASTERISK (*) ARE REQUIRED

* NEW or RENEWAL (NOTE: Renewals, please fill-in all items and do not use "Same as before".

* NAME: _____ BIRTHDATE (*m/*d/yyyy): ____/____/____

Nickname: _____ If licensed: CALLSIGN: _____ LICENSE CLASS: _____

* ARRL MEMBER?: Yes No Life E-MAIL ADDRESS: _____

* MAILING ADDRESS: _____

* CITY: _____ * STATE: ____ * ZIP: _____

PHYSICAL ADDRESS: (If different than mailing address): _____

CITY: _____ STATE: ____ ZIP: _____

* PHONE NUMBER(s): (If multiple numbers, please check the one you want SIERA to use for contacting you)

HOME: _____ WORK PHONE: _____ CELL: _____

Please enter additional family or household members joining or renewing on the second page of this form:

Dues:	<u>Class</u>	<u>1 Year</u>	<u>2 Years</u>	<u>3 Years</u>	<u>No. of Votes</u>
	Individual	\$30.00	\$48.00	\$65.00	1
	Household	\$38.00	\$62.00	\$84.00	2
	Added Family	\$8.00	\$14.00	\$19.00	1
	Junior	NO FEE			1

Notes:

- "Household" membership consists of no more than two adults at the same address.
- "Added Family" memberships are for each additional family member at the same address.
- "Junior" memberships are FREE. Restricted to licensed Amateur Operators <18 years of age.
- Yearly dues are due January 1st. Dues are prorated on **initial membership only**. Have questions? Please contact membership chairman via the SIERA website "Contact Us" menu item.
- **New Member applications submitted and paid for on or after September 1st will have their first year of membership extended through December 31st of the following calendar year.**
- **If Junior Application, check here**

_____/_____/____ Amount Enclosed \$ _____
Applicant/Member Signature Date

If you have any suggestions for club improvement or any talents that would help the club members or the club, please note them on a separate sheet and include with your application.

When completed, please mail this application along with your check to the address shown at the top of this form.

NOTE: all required information must be completed or the application/renewal will NOT be accepted.

Thank you for taking the time to join or renew your membership with SIERA.

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