



MEMBERSHIP APPLICATION

Name: _____ Call Sign _____

Address: _____ License Class _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____

Signature: _____ Share Contact Info? _____ (Yes) _____ (No)

I hereby apply for membership in the Spout Springs Repeater Association. I have read and will abide by the SSRA Mission Statement, conducting myself in a manner that will not reflect unfavorably on the SSRA.

I understand that when operating under the SSRA Club Call Sign WF7S, or through an SSRA repeater, I am considered a guest operator of the amateur radio station owned by the SSRA.

I understand that I am expected to always identify my transmissions on the SSRA repeater in compliance with FCC Part 97. I will comply with the ARRL operating procedures avoiding transmissions that include profane language, racial, ethnic, religious or sexual slurs.

I understand that my dues are \$20 US dollars per year and afford me voting rights and early check-in for nets, as a member of the SSRA. Members receive a roster of other members of the SSRA, **and their contact information**. Roster will be e-mailed to members. Printed copies can be secured by US Postal Mail for \$5, and must be paid for in advance.

Please forward completed application and a Check or Money Order to:

SSRA

5302 Reagan Way

Pasco, Washington 99301