



MEMBERSHIP APPLICATION

Date: _____ Membership Level (X): ANNUAL_____ LIFETIME_____

Name: _____ Call Sign_____

Address:_____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email*:_____

Signature: _____

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 Association dues are \$20 dollars per year, and a Lifetime Membership is available for \$250. My current membership status affords me voting rights and early check-in for nets. Members receive a current roster of other voluntarily contributing members of the SSRA. Roster will be e-mailed to members.

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

Spout Springs Repeater Association
PO Box 5983
Kennewick Washington 99336

****For electronic delivery of roster and SSRA member communication. We will never share your email address!*