



TRI-STATE AMATEUR RADIO SOCIETY  
 P.O. BOX 4521 EVANSVILLE, IN 47724  
**MEMBERSHIP APPLICATION**

**2026**

Fill out if you want to join TARS. If you are already a member, please fill out to update records.

Name \_\_\_\_\_ Call \_\_\_\_\_ License Class \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Birthday mo: \_\_\_\_ day: \_\_\_\_\_

How long have you been a ham? \_\_\_\_\_ Are you an ARRL member? \_\_\_\_\_

What is your occupation?  
 \_\_\_\_\_

Do you have any portable or emergency equipment?

HF	2 meter	440 MHz	Batteries	Generator
Antennas	ATV	Packet	Phone Patch	Other

*Use back of form if needed to list special equipment and talents.*

Do you check into any nets? \_\_\_\_ Which ones? \_\_\_\_\_

What is your favorite type of amateur activity? \_\_\_\_\_

**Please list** What type of programs would you like to have at TARS meetings? \_\_\_\_\_

Do you plan to use the TARS repeaters? \_\_\_\_ Which ones? \_\_\_\_\_

- \_\_\_ Regular Member . . . . . \$25.00
- \_\_\_ Add'l Reg. Family Member/full. . . \$ 5.00 membership privileges
- \_\_\_ Associate member . . . . . \$25.00
- \_\_\_ Add'l Asso. Family Member/full . . \$ 5.00 membership privileges
- \_\_\_ Senior Member (Age 65 or older). \$12.50
- \_\_\_ Add'l Senior Family Member/full. . \$ 2.50 membership privileges
- \_\_\_ Student Member (through high . . .FREE school/non voting)
- \_\_\_ Student Member/full. . . . . \$12.50 membership privileges
- \_\_\_ Handicapped Member . . . . . \$12.50 (see bylaws)

Please mail this application with your check payable to TARS to:

**TARS**  
**P O BOX 4521**  
**EVANSVILLE, IN 47724**

or give to any club officer

