



Lower Columbia Amateur Radio Association – W7DG

Please Type or Print clearly. Use one form for each membership application.

LCARA
PO Box 906
Longview, WA 98632
Web: www.w7dg.org
Email:
w7dg.lcara@gmail.com

Name: _____ Call: _____

Address: _____ City: _____

State: _____ ZIP: _____

Phone: _____ Cell: _____

Email: _____

Class of License: _____ ARRL Member: Yes or No

Type of Membership: **New** or **Renewal**

Dues only cover about half of the basic club expenses. Please donate if you can.

Payment amount included: _____

Check type of membership:

- Association member: \$35.00
- HAM** Family member: \$17.50 (per member)
- Non-HAM** Family member: \$10.00 (per member)

For a family membership, list association member: _____

- Senior Association member (80+): \$10.00
- Junior Association member (18-): \$10.00
- Honorary Life membership: **No Charge**

Release and Indemnity Agreement

In consideration for the right to participate in LCARA activities, I hereby release the club and its members and instructors from any and all liability claims and cause of action arising out of or in any way connected to my participation in any club activity. I personally assume all risks in connection with club activities and agree to indemnify the club and its members and instructors from all liability, claims, and causes of actions which I may have arising from my participation in club activities. The items of this agreement will serve as a release and indemnity agreement for my heirs, personal representatives, and for all members of my family, including minors.

I state that I am eighteen (18) years of age or older, and legally competent to sign this release; I understand these terms are contractual and not a mere recital, and that the signing of this document is of my own free will. Parents or legal guardians must sign for persons under the age of eighteen (18) years of age.

Name: _____

Date: _____

Guardian: _____

Date: _____