K9WZ REPEATER MEMBERSHIP APPLICATION FORM rev 11/15/2002

PRIMARY MEMBERSHIP: \$ 25.00 PER YEAR

Entitles you to all the privileges of membership-including an autodial slot and inclusion on the mailing list. All paperwork is sent to you regarding membership status. At least the first person to join from a family must join at this level.

ASSOCIATE FAMILY MEMBER: \$ 10.00 PER YEAR

Available only to the family members of a Primary Member, living at the same address. Membership allows family members to use the repeater. Since no additional user number, DVR slot, or autodial number will be issued to the Associate Family Members, they will have to use those items issued to their Primary Member.

Primary Member (M	ust have at least one Primary Member to Join the	e Repeater Group)
Name:	Call Sign:	
Street:		
City:	State: Zip:	
Home Phone:		
Number you want in autodial s	slot if not same as above:	
Email Address		
Associate Family Men	nbers: (Living at the same address as Primary member) \$10.0	00 per person
Name and Call:		
		

Checks should be made out to WAYNE ZEHNER JR.

Send the completed form and check to this address:

K9WZ Repeater
11317 Iris Court
Plymouth, In.
46563-7667