



Indianapolis Repeater Association, Inc.

PO Box 1432
Indianapolis IN 46206-1432
www.w9ira.org

NAME: _____ CALLSIGN: _____ CLASS: E A G T N

Circle one

ADDRESS: _____ ARRL MEMBER: YES / NO

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ E-MAIL: _____

ASSOCIATE MEMBER INFORMATION (all hams living at same address, one dues payment):

NAME: _____ CALLSIGN: _____

NAME: _____ CALLSIGN: _____

NAME: _____ CALLSIGN: _____

ADDITIONAL FULL MEMBER INFORMATION (requires additional dues payment)

NAME: _____ CALLSIGN: _____

NAME: _____ CALLSIGN: _____

New member donation (dues) for membership through December 31, 2020:

Join January 1 through March 31	\$20.00
Join April 1 through June 30	\$15.00
Join July 1 through September 30	\$10.00
Join October 1 through December 31	\$5.00

Renewing membership donation (dues) for membership through December 31, 2020:

..... \$20.00

Additional donation \$ _____

TOTAL \$ _____

Membership cards will be issued to new members and those renewing members that request a new one, in the interest of cost reduction.

Request a new Membership card: YES / NO

Please send your completed application and payment to the address above