Chippewa Valley Amateur Radio Club

Membership Application Form

Fiscal Year: April 1st 2025 thru March 31st 2026

W9CVA CHIPPEWA VALLEY
147.375/110.9
AMATEUR RADIO CLUB W9cva.org

All fields required

Revised 3/1/2025 ce

Name:			
Call:			
Mailing Address:			-
City:	State:	Zip:	_
Wired # () E-mail : _			
Mobile # ()			
License Class: Novice Tech Tech+ Gen A E	E expiration date:		
ARRL Member: Yes / No ARRL Membership	Expiration Date: _		
Membership class () full membership \$20.00 (Must reside at the same residence as the full mem	•	member \$5.00	
Name: Call:		license class:	Name
Call: lic	cense class:	(additional space on back)	
Associate member() \$10.00 (non ham/non vo	ting)		
Amount enclosed: \$ Ck/Cash/Other:			
Please make payable to: Chippewa Valley Amateu	r Radio Club (or s	imply: CVARC)	
Mail to:			
CVARC			
5855 197th Street			
Suite 73			
Chippewa Falls, WI 54729			
I agree to abide by the Constitution and By-Laws of	of the Chippewa V	alley Amateur Radio Club.	
Applicant Signature:	D	ate:	
>>>>> FOR CVARC U	SE ONLY <	<<<<<<	
Check # Date: Rec'd:	Amt:	_ Tres: Dbase:	