## 2018 WOMG MEMBERSHIP FORM

Name:		_ Call sign:
Address:		_
City:		Zip
Telephone:		_
Email address:		
License class:	(techr	nician, general, advanced, extra)
ARRL member?	( yes or no )	
Areas of interest in ham	adio:	
Suggestions for Program	s and activities during 2	018:
*******	*******	************
RECEIPT FOR 2018 ME	MBERSHIP DUES PAY	MENT NIARA ( W0MG )
Date paid:	Amount paid: \$	(\$20.00)
Members name:		
		_Dave Knittel, K0CQH, TREASURER
		2537 Cottage Ave. Waverly, Ia. 50677
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