

SEMDXA
SOUTHEAST MICHIGAN DX ASSOCIATION
Membership Application and Renewal Form

Application Type (choose one)

___ NEW Full Membership

___ RENEWAL Full Membership

If Full membership, list ARRL DXCC Number here: _____

___ NEW Associate Membership

___ RENEWAL Associate Membership

Note: Full Membership requires that you have attained DXCC status - which means you have worked and confirmed at least 100 countries on the ARRL's DXCC list.

Contact Information

Current Callsign _____ Previous Callsign _____

Name _____

Address _____

City, State, Zipcode _____

Home Phone _____

Mobile Phone _____

Email Address _____

Are there any fields you DO NOT want published in the on-line SEMDXA

Directory?: _____

Mailing Instructions

Annual Dues: \$20

Please make checks payable to SEMDXA and mail to:

Bradley Nowak, N8SNM
4665 Melanie Lane
White Lake, MI 48383