

SEMDXA

SOUTHEAST MICHIGAN DX ASSOCIATION

Membership Application and Renewal Form

Membership Renewal _____

Application for New Membership _____

Full Membership _____

Associate Membership _____

Present Callsign _____ Previous Callsign _____

Name _____

Address _____

City, State, ZIP _____

Telephone Number _____

Email Address _____

Annual Dues: \$20

Please make checks payable to SEMDXA and mail to:

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