



**Keller Peak Repeater Association
Membership Application
930 Acorn Ln.
Corona, Ca. 92880**

Please Print

Date: _____ **New Membership** ___ **Renewal** ___

Name: _____ **Call Sign** _____ **Class** _____

Mailing Address: _____
City: _____ **State** _____ **Zip** _____ **Phone:** _____

E-Mail _____ **Share Info With Users Option** **Yes** ___ **No** ___

Family Members:

Name _____	Call Sign _____	Class _____
Name _____	Call Sign _____	Class _____
Name _____	Call Sign _____	Class _____
Name _____	Call Sign _____	Class _____

How would you like to be up-dated? Email ___ Mail ___

Are you a member of any of the following?

ARRL ___ Races ___ Skywarn ___ Satarn ___ Hospital Net ___ Red Eye ___
SAR ___ Red Cross ___ NTS ___

All Checks should be made out to KPRA and mailed to the above address. The Membership price is \$45.00 per family or \$30.00 per callsign. We are also currently looking for individuals who are great event planners & organizers. If any of you would like to participate directly as a net controller, control-op, board member or any other aspect of the KPRA club please list any position you would be interested in and we will see if we have a position for you. List as many as you want.
