



MidWest SSTRC, Inc.
Membership Application – 2021

- 1. Fill out the application below
2. Attach a check payable to MidWest SSTRC Inc. for a \$10.00 Membership Maintenance Fee (MMF)
3. Bring to a general membership meeting usually held the 3rd Monday of each month. Check www.midwestsstrc.org to verify the next meeting date or mail application to:
MidWest SSTRC, Inc.
Membership Coordinator
P.O. Box 8763
Madison, WI 53708-8763

(Please PRINT and use ink or type)

NAME: _____
First Middle Initial Last Nickname for ID

ADDRESS: _____
Street Address City State Zip

Home: (____) _____ Cell: (____) _____ Work: (____) _____

Home e-mail: _____ Work email: _____

DOB. ____/____/____ Ham License Class _____ Call Sign _____

Occupation(s): _____

Work: _____
Place of Employment Street Address City State Zip

Driver's License Number: _____ Issuing State: ____

Have you ever been convicted of a felony? _____ (yes/no)

If yes, provide dates, jurisdiction, details and outcome _____

Have you had any traffic and/or moving violations in the last five years? _____ (yes/no)

If yes, provide dates, details and outcome: _____

Are you a current ARES/RACES Member? _____ (yes/no)

Spotter training level (check one) None Basic Advanced Certified

New Members should complete the following and continuing members should update anything that has changed since last year's application:

Describe any radio equipment you currently have including HT, mobile and base station equipment, bands, power, etc.

How did you learn about Midwest SSTRC, Inc.? _____

Why do you wish to join Midwest SSTRC, Inc.? _____

Training source(s) and contact information: _____

Signing and submitting this application indicates you agree to allow your information to be used to perform background checks and that you fully understand MidWest SSTRC, Inc. (herein MidWest) may or may not approve your application and that MidWest has the right to revoke membership at any time. The MMF is nonrefundable except in the case of an application rejection. The MMF is not prorated. New and renewing members pay the full MMF regardless of when during the year the application is submitted.

Members must adhere to MidWest's Bylaws (as published in the Member's Section of the MidWest website), policies, and procedures in order to maintain membership. You agree and understand that MidWest members, officers, operators, and radio frequency providers are in no way responsible for the actions of the member. It is up to you, the member, to use common sense and good judgment at all times. You, the member, on your own, must insure your own safety. You further agree to hold MidWest, its Board of Directors and Officers, harmless against any and all claims.

Applicant signature: _____ Date: _____

For Office Use only:

MMF Received _____ / _____ / _____ Check #: _____

Application **NOT** approved: Date voted on by the Board of Directors _____ / _____ / _____ MMF returned _____ / _____ / _____

Application **APPROVED**: Date voted on by the Board of Directors _____ / _____ / _____

Assigned MidWest number: _____ Level of Membership approved by the Board of Directors: Probationary Member OR Full Member

Level: _____ Endorsements: _____ Info for ID given to ID Coordinator _____ / _____ / _____

Application, MMF and background check information given to Treasurer _____ / _____ / _____