



ARRL The national association for **AMATEUR RADIO®**

Club Commission Reconciliation Form

For use by ARRL Affiliated Clubs

Club Name _____ Date _____

Contact Name _____ Call Sign _____

Mailing Address _____

City _____ State _____ ZIP _____

Daytime Telephone _____ E-mail _____

ARRL Affiliated Clubs can retain \$15 for each **NEW** membership and \$2 for each **RENEWAL** submitted to ARRL Headquarters. A **NEW MEMBER** is defined as any individual who has never been a member of ARRL or any individual who has not held membership for two or more calendar years prior to the application submission. A **RENEWING MEMBER** can renew at anytime, even before their current membership term expires.

Memberships may not be combined with any other promotion or special offer. Other membership applications can also be submitted with this form (family, blind, and youth). For assistance, e-mail **clubs@arri.org**

	(A)	(B)		
REGULAR MEMBERSHIPS	NEW	RENEW		
For 1 year			(@ \$49 each)	(Line 1) = \$ _____
For 2 years			(@ \$95 each)	(Line 2) = \$ _____
For 3 years			(@ \$140 each)	(Line 3) = \$ _____

OTHER MEMBERSHIPS (no club commission)

Family, blind, youth Other Memberships (Line 4) = \$ _____

Blind Rate: No receipt of *QST*; requires a one time signed and dated statement of Legal Blindness. Dues subject to change without notice and are nonrefundable.

CALCULATE YOUR CLUB COMMISSION

Total NEW members in column (A) _____ multiplied by \$15 = (C) _____

Total RENEWing members in column (B) _____ multiplied by \$2 = (D) _____

TOTAL DUES: add lines 1 through 4 = \$ (E) _____

CLUB COMMISSION: add (C) plus (D) = \$ (F) _____

AMOUNT DUE ARRL: subtract (F) from (E) = \$ (G) _____

The Amount Due ARRL will be reduced using any credit card payments included on membership applications. Use the following payment options for any remaining balance due ARRL:

Amount due ARRL enclosed (Checks payable to "ARRL" in US funds only).

Charge amount due to MC, VISA, AMEX, Discover No. _____ Exp mm/year _____

Cardholder Name _____ Cardholder Signature _____

ARRL ■ 225 Main Street ■ Newington, CT 06111-1494 ■ USA
Toll free (US) 1-888-277-5289 or 860-594-0200 ■ www.arri.org/join



Contact Information

- I am a brand new member or my membership has been lapsed for 2 or more years. My club will keep \$15 of my dues.
- I am renewing (includes lapsed members of less than 2 years). My club will keep \$2.00 of my dues.

Name _____ Call Sign _____

Address _____

City _____ State _____ ZIP _____

Email _____ Phone _____

Date of Birth ____/____/____ **Get an annual birthday coupon (US only)**

My Family Member is Joining or Renewing: (\$10 per member)

Name _____ Call Sign _____

Name _____ Call Sign _____

Your Annual Membership Dues – Circle Your Choice/s.

	1 Year	2 Years	3 Years	
US	\$49	\$95	\$140	Monthly <i>QST</i> via standard mail for US members
Youth	\$25			Must be 21 years old or younger AND the oldest licensed Radio Amateur in the household
Canada	\$62	\$120	\$177	Monthly <i>QST</i> via standard mail for Canadian members
International	\$76	\$147	\$217	Monthly <i>QST</i> via standard mail for International members
International/Canada – no print <i>QST</i>	\$49	\$95	\$140	Digital <i>QST</i> only
Family	\$10	\$20	\$30	Must reside with primary member and have corresponding membership dates; no extra copies of <i>QST</i>
Blind	\$10	\$20	\$30	No <i>QST</i> delivery; all other member benefits apply. Requires a one time signed and dated statement of Legal Blindness

Additional membership options available online at www.arrl.org/join. US Memberships include \$21 per year for subscription to *QST*. Dues are subject to change without notice and are non-refundable. Only one free book and one monthly issue of *QST* per family. Memberships may not be combined with any other promotion or special offer.

- I do not want my name and address made available for non-ARRL related mailings.

Payment Information

Please charge my ARRL dues less my club's commission. I have paid the commission directly to my club.

\$ _____ Total Charge to: Visa MasterCard Amex Discover Check Enclosed

Card Number _____ Expiration Date _____

Card Holder's Signature _____

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