
(Checks may be made payable to RRRRA)

Send application form and check to:

RIVER RAISIN REPEATER ASSOCIATION, INC.
3292 Wells Road, Petersburg, MI 49270



Name _____ **Call** _____

Address _____

City _____ **State** _____ **ZIP** _____

ARRL Member (y/n)? ____

Phone _____

E-Mail Address _____

Membership: (@ \$20.00) _____

Donation (optional) _____

Total Enclosed: _____

