



Club Commission Reconciliation Form

For use by
ARRL
Affiliated Clubs

Complete this form and attach all membership applications with full payment.
ARRL pays commission directly to the club.

Club Name Cascade Amateur Radio Enthusiasts Date _____
Contact Name Lauralee Sweet Call Sign KK7JKY
Mailing Address POB 792
City Medford State OR ZIP 97501
Daytime Telephone 541-821-1225 E-mail prioritytx@carehamradio.com

ARRL Affiliated Clubs can receive \$20 for each **NEW** membership and \$5 for each **RENEWAL** submitted to ARRL Headquarters. Applies to Standard Membership only. 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 years prior to the application submission. A RENEWING MEMBER can renew at any time, even before their current membership term expires (up to 3 years pre-paid). Memberships may not be combined with and are not eligible for any other individual promotion or special offer.

Get a **FREE** copy of *The ARRL Handbook* for your club with 5 NEW memberships!

Limited time offer valid through December 31, 2024.

STANDARD MEMBERSHIP	New	# _____	x \$20 = \$ _____
	Renewal	# _____	x \$5 = \$ _____
	Total Commission		= \$ _____

Other membership types (family, student, blind) are not eligible for commission.

Please Make Club Commission Payment Via:

Direct Deposit to Account:
 Checking Savings
Bank: _____
Acct #: _____
Routing #: _____

Check to be Mailed to:
CARE - Cascade Amateur Radio Enthusiasts
Address: POB 792
Medford, OR 97501

Authorizing Signature for Direct Deposit:  _____

ARRL ONLY: Confirmed By _____ Date _____