

UTAH DX ASSOCIATION

Membership Application

Instructions: Please print Application.

Place a prominent asterisk adjacent to any item that you DO NOT want posted on the UDXA website or distributed publicly. Thank you, Mac.

Call Sign: _____ Date: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____@_____

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

ARRL Member: Yes ___ No ___

License Class: _____ Year First Licensed: _____

Operating Modes of Interest:

CW ___ SSB ___ Digital ___ VHF ___ QRP ___ Other _____

Awards Earned:

DXCC ___ 5BDXCC ___ WAC ___ WAS ___ WAZ ___ Challenge Award ___

IOTA ___ Other _____

Interested in contesting: Yes ___ No ___

Interested in participating as a guest operator at another station: Yes ___ No ___

Interested in providing a host station for an event: Yes ___ No ___

Interested in participating at a Multi/Multi effort: Yes ___ No ___

Interested in participating at a Multi/Single effort: Yes ___ No ___

Station Description:

Radio(s): _____

Antenna(s): _____

Tower(s): _____

Other Station Equipment (amps; etc): _____

In order to honor and recognize the individual efforts of club members, please provide the following information regarding your DXing activities. This information will be updated on a regular basis.

Total Contacts

Mixed Mode Contacts

Worked: _____ Confirmed: _____ Net Total (excludes deleted entities): _____

Phone Contacts

Worked: _____ Confirmed: _____ Net Total (excludes deleted entities): _____

CW Contacts

Worked: _____ Confirmed: _____ Net Total (excludes deleted entities): _____

Contacts by Band

160 Meters Worked: _____ Confirmed: _____

80 Meters Worked: _____ Confirmed: _____

40 Meters Worked: _____ Confirmed: _____

30 Meters Worked: _____ Confirmed: _____

20 Meters Worked: _____ Confirmed: _____

17 Meters Worked: _____ Confirmed: _____

15 Meters Worked: _____ Confirmed: _____

12 Meters Worked: _____ Confirmed: _____

10 Meters Worked: _____ Confirmed: _____

6 Meters Worked: _____ Confirmed: _____

Annual Membership Fee: \$25.00 Check enclosed _____
(Part year fee after July 1st, \$12.50)

Mail membership form and fee to:

**Lauri "Mac" McCreary, KG7C
747 S 100 W
Lehi, UT 84043**