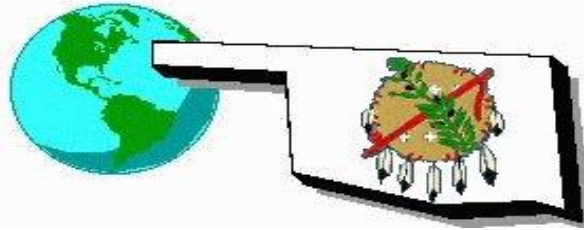




OKlahoma DX Association



OKDXA Membership Application

Name: _____ Call: _____

Address: _____

City/State/Zip: _____

Phone Number: _____ Email: _____

License Class: _____ Year First Licensed: _____

Total Confirmed Countries: ___ ARRL Member: Y / N / Life (Circle one)

New membership or Renewal? _____

Dues enclosed:

\$20.00 Regular Member ___

\$10.00 Senior Member (Age 65 or older) ___

\$10.00 Handicapped Member ___

\$ 5.00 Family Member ___

Mail Dues to: (Payable to OKDXA)

Roger Simpson – K5RKS
5701 Holly Brooke Ln.
Oklahoma City, OK 73135

Comment or message: _____

THANKS FOR YOUR SUPPORT OF THE OKLAHOMA DX ASSOCIATION!