



Membership application form

Hereby I want to become a member of the LARU a.s.b.l. With my signature, I certify that I have read and understood the bylaws (www.laru.lu/de/laru/satzung.html). I also agree that my callsign and name will be published in the online-callbook.

First name: _____ **Last name:** _____
Nationality: _____ **Callsign:** _____
Profession: _____ **Birthdate:** _____
Email: _____ **Phone/Cell:** _____
Street: _____ **No.:** ____
Town: _____ **ZIP:** _____

Interested in the following membership*:

- Associate
 Basic membership

Date: _____ **Signature:** _____

* The Board of Directors will consider the availability of the membership and communicate the decision in the next weeks. During the probationary period the basic (passive) membership is valid.

The Board of Directors compares an application request for working groups with the requirements within the working groups. The respective group leader will announce the inclusion in his group. During the probationary period, the working group can be supported as a basic (passive) member.

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