



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:** _____
Birthdate: _____
Email: _____ **Phone/Cell:** _____
Street: _____ **No.:** ____
Town: _____ **ZIP:** _____

Interested in the following membership*:

- Basic membership
- Basic membership with participation in the preparation course (NOVICE/HAREC)
- Associate

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.

Luxembourg Amateur Radio Union, a.s.b.l.
Post Box 85 ~ L-9201 Diekirch ~ Grand-Duchy of Luxembourg
Tel: +352 4975 - 1000 Fax: +352 4975 - 1999
info@laru.lu www.laru.lu
Registered address: rue Joseph Theis 7, L-9286 Diekirch
R.C.S. Luxembourg F9810