

Kappa Delta Phi
National Affiliated Sorority Alumnae Association, Inc.
Membership Form

Dear Sister,

_____ **Your Jan. 1 – Dec. 31, 2015 membership dues in the amount of \$20.00 is now due.**
 _____ **Life Membership -- \$250.00.**
 _____ **Your 2015 membership dues have been paid. If you would like to make an**
 _____ **additional contribution, please complete the appropriate section below.**
 _____ **Your Lifetime Membership has been paid. If you would like to make an**
 _____ **additional contribution, please complete the appropriate section below.**

I am renewing my membership. _____

I am a new member. _____

<p style="text-align: center;"><u>Over & Above Fund</u></p> <p>I would like to contribute to the “Over and Above Fund” that will be used to purchase items, services and support the sorority Alumnae activities that are not part of the general operational budget. Enclosed is a check in the amount of \$ _____.</p>	<p style="text-align: center;"><u>Calling All Angels Fund</u></p> <p>I would like to contribute to the Angels fund to support nominated sisters and brothers faced with unfortunate circumstances. Enclosed is a donation of \$ _____.</p>
<p style="text-align: center;"><u>Educational Fund</u></p> <p>I would like to contribute to the fund for the Kappa Delta Phi National Affiliated Sorority Educational Foundation, which will be awarded to an active sister at Convention \$ _____.</p>	<p style="text-align: center;"><u>Volunteer</u></p> <p>I would like to volunteer:</p> <ul style="list-style-type: none"> <input type="checkbox"/> To Serve on a committee <input type="checkbox"/> To serve on individual project <input type="checkbox"/> Other (please describe _____)

INFORMATION ABOUT YOURSELF THAT YOU WANT PRINTED IN THE ALUMNAE GOLD

MEMBERSHIP INFORMATION (PLEASE PRINT CLEARLY)

Name _____

Chapter _____

Year Pledged _____

Mailing Address _____

Telephone _____

E-Mail Address (Please printed clearly) _____

News for the Alumnae Gold:

**Please make check payable to
Kappa Delta Phi NAS
Alumnae Association, Inc.
Mail to: Maryanne Burt/Treasurer, 33 Woodland Dr., Norwich, CT 06360**