

**North Shore Alumnae Membership Form 2025-26**  
**Please complete and mail this form with your check to: Zeta Tau Alpha c/o:**  
**Chris Weismann, 36846 Old Woods Trail, Gurnee, IL 60031**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Date of Birth (month and day):** \_\_\_\_\_

**College/College Chapter/Year of Initiation:**  
\_\_\_\_\_

**Profession/Employer:** \_\_\_\_\_

**Ideas for Chapter Events:** \_\_\_\_\_

### **Levels of Membership**

**New Member: \$30**

Alumnae dues and fees  
paid to ZTA IO.  
Eligible to participate  
in all activities. Applies  
to first year of membership.

**Full Membership: \$35**

Alumnae dues and fees  
paid to ZTA IO.  
Eligible to serve as  
an officer in the chapter

**Crown Membership: \$50+**

Alumnae dues and fees  
paid to ZTA IO.  
Eligible to serve as  
an officer in the chapter  
Receives special recognition.

Membership Level:      \_\_\_\_\_New Member      \_\_\_\_\_Full Member      \_\_\_\_\_Crown Member

**Check** enclosed for \$\_\_\_\_\_ Please make checks payable to Zeta Tau Alpha.

**Credit Card** Payment, visit our website at: [northshoreil.zetataualpha.org/membership-information](http://northshoreil.zetataualpha.org/membership-information) or  
scan QR code below. Please Note: A small convenience fee will be added for credit card payments.



\_\_\_\_\_ I am unable to participate in the alumnae group at this time, but I would like to make a donation  
to the Zeta Tau Alpha Foundation, to support breast cancer education and college scholarships for young  
women. I have enclosed a check for \$ \_\_\_\_\_ made out to the ZTA Foundation.