Greater Atlanta Day Alumnae Chapter
of Kappa Delta Sorority

MEMBERSHIP FORM 2019-2020

IF RENEWING, PLEASE FILL IN NAME ONLY - UNLESS INFO IS DIFFERENT FROM 2017-18 YEARBOOK

Name: _____
First Maiden Last Husband (* if deceased)

Address: _____ City: _____

State: _____ Zip Code: _____ Birthday (Month/Day): ____/_____

Phones (home): _____ (Cell): _____

E-mail Address: _____ Year Initiated: _____

Chapter: _____ School: _____

___ I would like a printed copy of the Yearbook.

I approve release of personal information for Website, Facebook, GADAC, and Yearbook.

Signed _____

I will support **Kappa Delta** by:

- Paying **ACTIVE MEMBER** dues of **$45.00** to GADAC of Kappa Delta **$_____**
  Actives receive a yearbook, newsletters, and notification of meetings and special functions. Please submit a photo for the yearbook if you have not done so.
- Paying **ASSOCIATE MEMBER** of **$20.00** to GADAC of Kappa Delta **$_____**
  Associates receive a yearbook, newsletters, and notification of special functions. Please submit a photo for the yearbook if you have not done so.
- Submitting a **DONATION TO SUPPORT THE FOLLOWING**
  (although not required for membership, these funds help us with our philanthropic work):

National Philanthropies

Kappa Delta Foundation	$_____
Kappa Delta Children in Need Fund (Prevent Child Abuse America)	$_____
Girl Scouts (supporting our Georgia scouting activities)	$_____

Historical Philanthropies

Children's Hospital of Richmond at VCU	$_____

Local Philanthropies

Interfaith Outreach Home (supporting a transition home for homeless families in need)	$_____
Wellspring Living (confronting the issue of childhood sexual abuse and exploitation)	$_____

Collegiate Chapter Assistance

Epsilon Gamma (University of North Georgia - Dahlonega)	$_____
Eta Mu (Georgia College & State University - Milledgeville)	$_____
Eta Omega (Kennesaw State University - Kennesaw)	$_____
Sigma Phi (University of Georgia - Athens)	$_____
Delta Chi (LaGrange College - LaGrange)	$_____

Atlanta Alumnae Panhellenic Association	$_____
Other _____	$_____

TOTAL ENCLOSED **$_____**

Make checks payable to **GADAC of Kappa Delta** and return to Treasurer,
Jean Logan, 322 Tuxworth Circle Decatur, GA 30033-5616
If you have questions, contact Jean at (678) 399-3028.

Membership dues are due by APRIL 1, 2019. Please respond even if you are not renewing.