# Greater Atlanta Day Alumnae Chapter of Kappa Delta Sorority

## MEMBERSHIP FORM 2017-2018

**IF RENEWING, PLEASE FILL IN NAME ONLY - UNLESS INFO IS DIFFERENT FROM 2016-17 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, 2017. Please respond even if you are not renewing.**