

Kappa Kappa Psi

National Honorary Band Fraternity



## **APPLICATION FOR LIFE MEMBERSHIP**

Alumni and Honorary Members of Kappa Kappa Psi are entitled to Life Membership. The Life Membership fee is \$500, payable in full. Life Members will receive a membership card, certificate, pin, membership in the Kappa Kappa Psi Alumni Association, and a subscription to *The PODIUM*.

## INSTRUCTIONS: Please type or print clearly all information! Payment must accompany this form.

Name:				Date:
(Last)	(First)	(Middle)	(Maiden)	
Permanent Address:(S				
(S	treet)	(City)	(Stat	e) (9-Digit Zip Code)
Phone:			E-mail:	
Occupation:			Forme	r Chapter <u>:</u> (Greek Name)
				(Greek Name)
College/University:			Gradua	ation Date:
Date of Active Initiation:			District: MW	] NC□ NE□ SE□ SW□ W□
	(Fall/Spring)	(Year)		
PAYMENT INFORMATIO	N			
My check in the amount Make checks pay	t of \$500 is enclose able to Kappa Kapp			
You may bill my VISA or	MasterCard.			
Name on Card:				VISA MasterCard
Card #:				Exp. Date:
For HQ Staff Only				
NHQ Auth:	Amount:	Rece	eipt Number:	Date Processed:
Verification of Initiation:	N	IHQ Initials:		Life Member Number:
L	Plaa	se complete and	I return to:	