

Delta Delta Delta
 Atlanta Alumnae Chapter
Membership Form (2016-2017)

Name: _____
 _____ *Last* _____ *First/Preferred* _____ *Maiden*

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Chapter: _____ University: _____

Occupation: _____ Title: _____ Initiation Year: _____

Company: _____ Work Phone: _____ ext. _____

I would like my company/occupation information to be published in the Atlanta Alumnae Chapter Directory's networking section (received by dues paying members ONLY).

Birthday: _____ Spouse/Partner's Name: _____ Occupation: _____

New Member: Yes No

Interest Groups – I'm interested in receiving information about (check all that apply):

- 20Somethings
- Delta Day Group
- Delta Nights
- Night Book Club
- Day Book Clubs
- Food & Wine Group
- Delta Squared

Community Service – I'm interested in participating in/volunteering for:

- St. Jude Walk/Run to End Childhood Cancer (Atlanta) on Saturday, September 24, 2016
- Care Affair Committee

Work with Collegians – I'm interested in:

- Supporting the Emory Chapter by serving on the Collegiate-Alumnae Relations Committee
- Assisting with Emory Recruitment
- Providing a reference for _____ County, _____ School

Alumnae Chapter Support

- I'm interested in getting more involved by serving as an officer, chairperson, or committee member. Areas of interest and/or skills: _____
- I'd be happy to host a meeting at my home or clubhouse
- I'd like to suggest the following program ideas: _____

Carpooling

- I'm interested in carpooling to events and live in: _____

Communication – All members will receive the monthly enewsletter, the bi-annual chapter newsletter (Starlights), and a membership directory. To save money, the directory and Starlights will be sent electronically unless you check the boxes below:

- I need Starlights as a hard copy
- I need the directory as a hard copy

Dues – Choose one and make checks payable to Delta Delta Delta:

If paying online with PayPal, convenience fees are additional and will be added to the total amount.

- \$35 – 2015 or 2016 Graduate
- \$35 – Golden Circle Member (50+ years Tri Delta member)
- \$48 – Regular Alumnae Membership
- \$68 – Patron Member (assists Atlanta Alumnae Chapter financially)
- \$28 – Life Loyal Member (paid DDD Life Loyal dues) – includes local dues only
- \$48 – Life Loyal Patron Member (paid DDD Life Loyal dues) – assists Atlanta Alumnae Chapter financially

In addition to my dues, I would like to contribute to:

- Care Affair (benefiting CURE Childhood Cancer) \$_____ (make check payable to Care Affair)
- Delta Delta Delta Foundation \$_____ (make check payable to DDD Foundation)

Membership forms & checks should be sent to: **OR** **Use Paypal:** <http://www.atlantatridelta.com/Membership.html>
Marty Webb, Membership Chair
 2900 Nancy Creek Rd NW, Atlanta, GA 30327
Membership questions should be directed to:
 membership@atlantatridelta.com 404-605-0065