

Alpha Xi Delta

Atlanta-North Metro Alumnae Association

2019–2020 Membership Information

Name: _____

Address: _____

Home phone: _____ Cell phone: _____

e-mail address: _____

College/University: _____

AΞΔ Initiating Chapter: _____ Year _____

Last Name at Initiation: _____

Birthday: _____

Your Contribution:

- | | |
|--|-----------------|
| <input type="checkbox"/> Annual membership dues | \$45.00 |
| <input type="checkbox"/> Annual patron membership dues | \$35.00 |
| <input type="checkbox"/> I'd like to contribute additional funds to the Alpha Xi Delta | \$5.00 |
| Foundation - please indicate how much you will be donating | \$10.00 |
| <input type="checkbox"/> I'd like to contribute additional funds to the Atlanta | \$15.00 |
| Alumnae Panhellenic Association Scholarship fund- Please | |
| indicate how much you will be donating. | Other: \$ _____ |

Total Contribution \$

- I prefer Patron status this year – By checking this box, you will receive the President's letters and be notified of special events only.

Please make one check payable to: **Alpha Xi Delta ANMAA**

Please return this form and check to:

Amy Jones
Financial Vice President
702 Meadowbrook Lane NE
Marietta GA 30060