

ALPHA PHI ALPHA FRATERNITY, INC. $^{\circ}$ | PO BOX 405478, ATLANTA, GA 30384-5478

REACTIVATION FORM

Please return me to the rolls of active membership. Enclosed are my payments for Grand Tax, National Housing & Building Fund (if not paid previously), and/or a tax-deductible contribution to the Education Foundation. I understand that I may pay with a money order, cashiers check, or credit card.

Please compl	ete the form bel	low and return it	with you	ır payment. A ı	receipt will be returne	ed upon	request.		
Account No.	or SS No.:								
Full Name:									
Address:									
City:						State:		Zip:	
Home Telephone:				Work Telephone:					
Email Addres	s:								
Date of Birth:		(MM/DD/YYYY)							
Initiation Date:				(MM/DD/YYYY))				
Chapter of Initiation:					Last Chapter Active With:				
Member is no	ow active in								
Member is now active in: Chapter				Key No.		Locatio	n		
	, please write General	Organization #201		, ,					
D 1 1 11	[75 1 1 2 T	1						T	
Reclaimed by	r: [Brother's Na	meJ					Chapter:		
Please select	from the follow	ing payments: *	Applies only	y to college member	rs coming directly out of coll	lege.			
Alumni Grand Tax			\$150.00						
1 st Year Alumni*			\$75.00*						
2 nd Year Alumni*			\$112.00* Applies only to college members						
College Grand Tax			\$75.00						
Late Fee (if paid after November 15)		mber 15)	\$10.00						
National Housing & Building Fund		ilding Fund	\$100.00 (a one time only payment)						
Total:				Cash					
					Credit (email: forms@apa1906.net)				
					Check (Mail PO Box 405478, ATLANTA, GA 30384-5478)				
Optional Edu	cation Foundat	tion Donation (t	ax deduc	tible)					
\$500	\$250	\$100	\$5	0					
	nformation - Vi	sa, MasterCard							I
Type		Credit Card Number						Exp. Date	
Name on Car	d:								
Signature								Date	
Alpha Phi Al _l		rn to: Inc. Membershi action, MD 2070		3					

FOR OFFI	CE USE ONLY
TRANSACTION DATE:	
PROCESSED BY:	
DATE PROCESSED:	
REMITTANCE NO:	

Phone: 1.800.373.3089 Email: forms@apa1906.net

Or email forms@apa1906.net