

Rho Alpha Chapter
Lambda Pi Eta
University of Delaware

MEMBERSHIP APPLICATION



Name:

Local Address:

Permanent Address:

Phone Number:

Cellphone:

E-mail Address:

Concentration (Please circle at least one): MASS IP PR OTHER

Are you interested in holding an office? If so, which office?

Please list some of your interests and/or hobbies:

1

2

3

4

What kind of activities would you like to see our Chapter involved in?

1

2

3

4

For Office Use Only

\$30.00 One-Time Membership Fee Paid _____ (date)

\$20.00 Chapter Dues 2007 Paid _____ (date)

Please return your application and a check for \$50.00 to 250 Pearson Hall by October 31, 2007