## National Alpha Tau Alpha Order Form & Initiation Report

## Please type or print the following information: Chapter: \_\_\_\_\_ University: \_\_\_\_\_ Contact Person: Address to which materials are to be sent: City: State: Zip: Initiation date (the date you would like placed on the shingles) Initiation Fee (\$25.00 each) \$\_\_\_\_\_ Number initiated Number of Shingles\* Shingle Fee (\$1.00 each) \$\_\_\_\_\_ Lapel Pin Cost (\$4.00 each) \$\_\_\_\_\_ Number of ATA Lapel Pins TOTAL ENCLOSED: **\$** Please make checks payable to National Alpha Tau Alpha **Send to:** Gary Ochs National ATA Secretary/Treasurer University of Illinois 174B Bevier Hall 905 S Goodwin Ave Urbana, IL 61801 For Office Use Only Date Received \_\_\_\_\_ Paid Yes No Check Number

Shingles Sent

Pins Sent\_

Date

Date

<sup>\*</sup>Membership certificate

## **Initiation Report**

Chapter		University		
Please type the following information.				
Roll Number	Name of Initiate	Graduation Date	Degree	Home Address
Date member were or will be initiated				