ETA SIGMA PHI

Report on Initiates

Please complete this report and return it as soon as possible after each initiation to the national office. The names of initiates must be written *legibly* as they should appear on the membership cards and certificates. A typed list is preferable. The fee schedule is on the second page of the form. E-mailing a copy of the list of initiates to sick@rhodes.edu or faxing it to 901-843-3633 will not only expedite the order but will also insure that the names are recorded on membership cards and certificates accurately. Your payment should be mailed to the Executive Secretary. Thank you for your cooperation.

Report on Initiates of ______ Chapter of _____ (institution).

| Name of Adviser | |
|--|--|
| Address | |
| | Zip Code |
| Phone Number () E-m | ail Address |
| Date of Initiation: Month Day | Year |
| ACTIVE (Undergraduate) MEMBERS (\$40 per initiate) | ASSOCIATE (Graduate Student) MEMBERS (\$20 per initiate) |
| | |
| | |
| | |
| | |
| | Associates @\$20: Total \$: |
| | HONORARY MEMBERS (no fees)* |
| Active Members @ \$40: Total \$: | |
| Replacement Certificates | Certificates for Associate (please indicate which names) |
| Name: | |
| Initiation Date: | |
| @\$15 each: Total \$: | @\$10 each: Total \$: |

*To waive fees for honorary memberships, a few sentences describing each honoree's contribution to the discipline are required. These statements will be published in the *Nuntius*.

SUMMARY of Order

| Active Members (\$40 each) | Total \$ |
|---|----------------------|
| Associate Members (\$20 each) | Total \$ |
| Certificates for Associate Members (\$10 each) | Total \$ |
| Replacement Certificates (\$15 each) | Total \$ |
| GRAND TOTAL: \$ | |
| National F | ees |
| Initiation fee for active membership, consisting of undergrad students duly initiated by a local chapter (including a certifica membership card, lapel pin and a subscription to <i>NUNTIUS</i> | te, |
| Initiation fee for associate membership, consisting of graduat students in classics elected under the requirements of member (membership card only): | |
| Members elected <i>honoris causa</i> by local chapters: (membership card and lapel pin): | no fees |
| Membership certificates for associate and honorary members | \$10 per certificate |
| Replacement certificate | \$15.00 |
| Please keep a copy of this report for your own records. | |
| Date: Signature of person reporting | |
| Please mail this report, with a check or money order for the g not send the checks of individual members or cash) as soon a | |
| David Sick, Executive Eta Sigma Ph | |

David Sick, Executive Secretary
Eta Sigma Phi
Department of Greek and Roman Studies
Rhodes College
2000 North Parkway

2000 North Parkway Memphis, TN 38112

Phone: 901-843-3907 Fax: 901-843-3633 Email: sick@rhodes.edu