

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-mail Address _____

Date of Initiation: Month _____ Day _____ Year _____.

ACTIVE (Undergraduate) MEMBERS (\$40 per initiate)	ASSOCIATE (Graduate Student) MEMBERS (\$20 per initiate)
	Associates @\$10: 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 Fees

Initiation fee for active membership, consisting of undergraduate students duly initiated by a local chapter (including a certificate, membership card, lapel pin and a subscription to <i>NUNTIUS</i>):	\$40 per initiate
Initiation fee for associate membership, consisting of graduate students in classics elected under the requirements of membership (membership card only):	\$20 per member
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 grand total payable to **Eta Sigma Phi** (please do not send the checks of individual members or cash) as soon after the initiation ceremony as possible to:

David Sick, Executive Secretary
Eta Sigma Phi
Department of Greek and Roman Studies
Rhodes College
2000 North Parkway
Memphis, TN 38112

Phone: 901-843-3907

Fax: 901-843-3633

Email: sick@rhodes.edu