



**Copies To:**

National President  
National Treasurer  
(include checks)  
Chapter File

**SIGMA BETA SORORITY, INC.**  
**NEW MEMBER REPORT**

This report shall be sent to the National President and National Treasurer within two weeks following installation of members.

Chapter Name: \_\_\_\_\_ Charter City: \_\_\_\_\_

We have installed the following new member(s) on: \_\_\_\_\_

National Dues are \$45.00 per member – Total enclosed: \$ \_\_\_\_\_

Charity Assessments are \$5.00 per member – Total enclosed: \$ \_\_\_\_\_

Please make separate checks: 1. National Dues 2. Charity Assessments

**NOTE:** If a new member is installed after October 1<sup>st</sup>, dues will be due January 1<sup>st</sup>.

**Please type or print:**

<u>Last</u> <u>Name</u>	<u>First</u> <u>Name</u>	<u>Complete</u> <u>Address</u>	<u>Phone</u> <u>Number</u>	<u>Reinstated</u>	<u>Installation</u> <u>Date</u>
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