**Delta Kappa Gamma**

**Alpha Omega Chapter**

Active members, if you wish to divide the $72.00 dues fee into two/three equal installments, please use this form. You may mail your payments to:

Barbara Jones

701 Robinson Road

Aurora, NC 27806

**Thank you for being an active member of Delta Kappa Gamma!**

**Delta Kappa Gamma Annual Dues**

Please make checks payable to **DKG/Alpha Omega.**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Due: Oct. 15, $22**

**3 payments plan**

**Payment Plan #3 installments**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Delta Kappa Gamma Annual Dues**

Please make checks payable to **DKG/Alpha Omega.**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Due: Sept.15**

**2 payments- $36**

**3 payments- $25**

**Payment Plan #2 or #3 installments**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Delta Kappa Gamma Annual Dues**

Please make checks payable to **DKG/Alpha Omega.**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Due: Aug. 15**

**2 payments- $36**

**3 payments- $25**

**Payment Plan #2 or #3 installments**

**ALL FEES ARE DUE BY OCTOBER 15.** If you foresee any problems, please let the treasurer know before October 15th so arrangements may be made**.**

**Photo Release**

I grant permission to Alpha Omega Chapter and Eta State to use my photograph on its websites and/or in chapter and state Newspapers and other Society publications.

Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**