**DELTA SIGMA THETA SORORITY, INCORPORATED**

***A Service Organization Since 1913***

To: Middletown (DE) Alumnae Chapter

Subject: Verification of Membership

Date:

Kindly complete this form and submit to Middletown (DE) Alumnae Chapter on or before October 18, 2020. This will ensure an accurate record of your membership. Your cooperation in this matter will be greatly appreciated.

Member #

Name:

Address:

Telephone (home): (Cell)

1. Name When Initiated:
2. Approximate Date of Initiation:
3. Chapter in Which Initiated:
4. Last Chapter in Which You Paid Grand Chapter Dues:

* Name at That Time:

1. Chapter in Which You Wish Membership:

Not Applicable

Chapter President Chapter Financial Secretary

Cordelia Bostic Leslie McNair-Jackson

PO Box 609 Date Emailed to Grand Chapter (if applicable)

Odessa, DE 19730

Email Completed Form To:

[Info.dstmiddletownde@gmail.com](mailto:Info.dstmiddletownde@gmail.com)

**Verified By: Date:**