

Name of Member \_\_\_\_\_

**2010 Beta Chi Dues**

Please complete the following form and return it with your check to: Debbie Miller, 901 N. 3<sup>rd</sup> St. East, Haskell, TX, 79521

Check only those items for which you are paying: **Total amount is due by October 10**

- \_\_\_\_\_ Active Member Dues and Fees (lump sum) \$68.00
- \_\_\_\_\_ Active Member Dues and Fees (2 installments) \$34.00 X 2
- \_\_\_\_\_ Reserve Member Dues and Fees (lump sum) \$37.00
- \_\_\_\_\_ Reserve Member Dues and Fees (2 installments) \$18.50 X 2
- \_\_\_\_\_ Gift to Chapter in Honor or Memory of \$\_\_\_\_\_

Total Amount of Check (you may postdate a second check) \$\_\_\_\_\_ **You may pay with check made payable to "Beta Chi"**

Name of Member: \_\_\_\_\_

Name of Member's Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Name of School: \_\_\_\_\_

Current Position: \_\_\_\_\_

Birthday: \_\_\_\_\_ (Chapter Profile Purposes)

Year Entered Teaching: \_\_\_\_\_ Degrees Held: \_\_\_\_\_ Bachelor \_\_\_\_\_ Master \_\_\_\_\_ Doctor

**Publication Permission Form (sign only one)**

Beta Chi Chapter of the Delta Kappa Gamma Society International has my permission to publish my name, picture, and email address in official local, state, and international publications and/or on the Beta Chi website. **Not signing or returning this form will automatically give permission for publication.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I do not give Beta Chi Chapter of the Delta Kappa Gamma Society International permission to publish my name, picture, and email address in official local, state, and international publications and/or on the Beta Chi website. **Not signing or returning this form will automatically give permission for publication.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date