

KAPPA SIGMA FRATERNITY
2011-2012 PARENTS' CLUB MEMBERSHIP

FATHER'S NAME _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

EMAIL _____

MOTHER'S NAME _____

ADDRESS _____

CITY _____ STAT _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

EMAIL _____

SON'S NAME _____

ANTICIPATED YEAR OF GRADUATION _____

Enclosed are Parents' Club dues of \$100.00 \$ _____

Also enclosed is a monetary Rush contribution of \$ _____

HOMECOMING 2011 – November 5

I am able to help with decorating Yes _____ No _____

I would be willing to serve as a Parents' Club Officer Yes _____ No _____

Please return to: SUSAN LEBER 121 North Oak Dr. Madison, MS 39110