ALPHA PHI ALPHA FRATERNITY, INC.
Alabama District Association

CHAPTER REGISTRATION FORM
October 9-10 2020

Registration Fees:	Per Alumni Brother	$100
	Per College Brother	$75

PLEASE PRINT OR TYPE

Chapter Name: _____ **Key#** _____

Address: _____

City: _____ **Zip Code:** _____ **Contact Name:** _____

Phone Number: _____ **E-mail Address:** _____

Delegate Name(s)

Name	Membership ID or SS#
1.	
2.	
3.	
4.	
5.	
6.	
7.	

*(Each Delegate listed **must** fill out separate "Brother Registration Form")*

Chapter President: _____ _____ _____
Signature **Date**

District Assessments:

a. Delegate Registration (# Delegates x Registration Fee Above) $_____

b. Chapter Tax (# Active Members x **$25** (Alumni) **$10** (College)) $_____
(Minimum Chapter Tax payment of **$40** for Chapters with less than seven (7) members)

GRAND TOTAL $_____

Mail Check or Money Order to:

Alpha Phi Alpha - Alabama District
Bro. Roy Saulsberry, III, Financial Secretary
4206 Thames CT
Montgomery, AL 36106
Email: roysaulsberry@gmail.com