



KAPPA ALPHA THETA

Life Loyal Enrollment Form

I am enrolling myself in Life Loyal

I am buying a Life Loyal enrollment for a member

Life Loyal member's name:

(First)

(Maiden)

(Last)

Life Loyal member's initiating school: _____

Life Loyal member's initiating chapter: _____

Mailing address of Life Loyal member: _____

Street

City

State/Province

ZIP/Postal Code

Country

Phone number of Life Loyal member: _____

Email address of Life Loyal member: _____

Name of gift giver (if applicable): _____

Phone number of gift giver (if applicable): _____

Email address of gift giver (if applicable): _____

Please do not send me premiums (pin, card, etc.). I only want to receive all printed issues of the *Theta Magazine*.

Do not list my name in the *Theta Magazine*.

Life Loyal Payment Options

I have enclosed a check payable to Kappa Alpha Theta Fraternity for \$469.

Charge my credit card \$469.

Life Loyal Payment Options for 50-Year Thetas

(options only for 50-plus-year Thetas)

I have enclosed a check payable to Kappa Alpha Theta Fraternity for \$339.

Charge my credit card \$339.

CREDIT CARD INFORMATION

Name on Card: _____

Credit card number:

Expiration date: _____

Security code: _____

Signature:

SEND THIS FORM AND PAYMENT TO:

Kappa Alpha Theta, Life Loyal

8740 Founders Road

Indianapolis, IN 46268

You may also email

thetalifeloyal@kappaalphatheta.org,

call (800) 526-1870 ext. 140, or visit

<http://thetalifeloyal.org> to become a member.

Payments made to Kappa Alpha Theta Fraternity are not tax-deductible.