



Athens State University
Phi Theta Kappa Alumni Association
Student Member/Association Member Application

Please fill out the Application and mail the completed form with a copy of your Phi Theta Kappa certificate/card from your 2yr college (if you are joining as an alumni member) and a one-time \$25 Alumni membership fee (check or money order made out to Phi Theta Kappa Alumni Association Athens State) to the address below. You will receive verification of membership and induction instructions following receipt of application and acceptance.

ASU Phi Theta Kappa Alumni Association
Athens State University
Attn: Dr. Kimberly Jack
300 N. Beaty Street
Athens, AL 35611
(256)216-6632 Office
Email: Kimberly.jack@athens.edu

I am joining as an: _____ Alumni Member _____ Associate Member

PLEASE PRINT:

NAME:

(First) (Middle) (Last)

Has your name changed since you were inducted? _____

If yes, please write name as it was when you were inducted: _____

Mailing Address:

Street City State /Zip

ASU Student Number Phi Theta Kappa Membership Number

Two year college transferred from: _____

Home Phone Cell Phone

ASU Email: Alternate Email:

I am willing to assume a leadership role in the ASU Phi Theta Kappa Alumni Association. Please check one:

_____ YES _____ NO