## KKΓ Houston Alumnae Association 2025–2026 Dues Form

Please return this form with your check to KKF Houston Alumnae Association, Alumnae Records Office, P.O. Box 876, Ithaca, NY 14851-0876. Monies paid to the association are not tax deductible as charitable contributions for federal income tax purposes.

2025-20	DZO DUES FORM	are not tax deductible as c	haritable contributions	s for federal income tax purposes.
Member: Social title	First name	Мі	ddle name	
Maiden name	Nickname	La	Last name	
Spouse: Social title	First name		Middle name	
	Last name			
	Address			
Your Kappa member number appears can't find yours, contact kkghq@kkg	s on the label of the national Key magazing .org or call 866-KKG-1870.	e and on the kappakappagamma.org wo	ebsite under "edit profil	e". They range from 2 to 7 digits. If you
City		State	Zij	י
Preferred phone #	Prefer	red email address		
Chapter and school			I	nitiation year
selecting any other dues ca Step 1: Required Per Capita \$39 Fraternity per ca initiation date or mer Step 2: Association Dues (s \$45 Kappa dues (age \$50 Kappa dues (age \$	a Dues (select one) pita dues (required for all members) pita dues (required for members within nbers who have reached their 65-year elect one) 31 or older) 30 or younger) s (living outside any association area ber dues (Houston is not your primary and Extras <u>Your extra generosity hea</u> recruitment assistance: \$ sting fee <i>Dues will be accepted through Februa</i>	n eight years of member milestone) ) / association) <i>lps to defray association expenses</i>	Visit our v your d www.hous Dues must be in order to be ind	website to pay ues online! stonkappas.org paid by July 1, 2025 cluded in the directory.
<ul> <li>Book Club</li> <li>Holiday Tea Committe</li> <li>Hosting a meeting in</li> <li>Kappa Kafe (lunch gr</li> </ul>	my home 🔲 Night Ov oup) 🔲 Pickleba	lah Jongg loche (dinner group) vls (younger night group) ıll	<ul> <li>Social (help v</li> <li>Stitchers (net</li> </ul>	
your listing information, must you have a new listing, or if y	\$10 to be included in the "Kappa be received by <b>July 1, 2025</b> , in you have corrections or additions would like us to reprint it, check h	order to be included in the dire to what was published in the	ectory. Please fill ou	ut this information completely if
Name		Job/position		
			ione#	
Business address				
Email address		Type of business		

**Legacy Data:** Legacy Data: Do you have a family member who is a high school senior in Houston who will be going through Sorority recruitment? Please share their information below.

Kappa's name	Legacy's name	
Relationship	Legacy's high school	
Graduation year	Legacy's address ( <i>if different from yours</i> )	