



Membership Application

- New Membership
- Renewal

Please PRINT or TYPE All Information Clearly and Be Sure to Sign This Application.

Last Name:	First Name:	MI:	
STREET ADDRESS:	CITY:	STATE:	ZIP CODE:
HOME PHONE:	MOBILE PHONE:		
EMAIL ADDRESS:			
WERE YOU A MEMBER OF SOD?	IF SO, YEARS MARCHED:	INSTRUMENT:	
ARE YOU A MEMBER OF KAPPA KAPPA PSI OR TAU BETA SIGMA?			
ARE YOU INTERESTED IN SERVING ON A COMMITTEE? IF YES, WHICH COMMITTEE?			

The following is enclosed:

- \$50 SOD Purple Membership
- \$75 SOD Gold Membership
- \$100 SOD Purple & Gold Membership
- \$ _____ Donation

Make a payment with one of the following methods. Send a copy of your registration form and receipt to SOD.Club1966@gmail.com OR print them and mail them to the address below.

PayPal: @SODClub
CashApp: \$SODClub
Zelle: SOD.Club1966@gmail.com

Make Check or Money Order Payable to:
SOD Club
Mailing Address: PO Box 1461 Ridgeland, MS 39158

Signature: _____ **Date:** _____

Please note that dues are non-refundable, and you should receive a reply by letter and/or email within 4-6 weeks of application submission. Any amount paid over \$100 will automatically give you membership at the Purple & Gold Level. Thank you for your continued support of this organization and the ASU Band Program!

<u>For Office Use Only</u>		
Date Payment Received: _____	Amount Received: _____	Membership Number: _____