

Fall 2009 Greek Recruitment Registration Form

Please check one:

___ Sorority Recruitment, August 24-27, 2009/ **YOU MUST REGISTER ONLINE AT www.shorter.edu/greeklife**
Epsilon Sigma, Phi Mu, Zeta Tau Alpha

___ Fraternity Recruitment, August 31- September 4, 2009
Chi Phi, Delta Sigma Phi

Name: _____ Email: _____

Campus Box #: _____ Gender: Male Female (Circle one)

Phone: _____ Cell Phone: _____

Classification: FR SO JR SR Student ID: _____

Home Address: _____

High School GPA: _____ College GPA: _____

Extracurricular activities, awards, and honors: _____

Are any of your relatives a member of a fraternity or sorority? Yes or No (Circle one)

Name: _____ Relationship: _____

Fraternity or Sorority (which one) _____

Name: _____ Relationship: _____

Fraternity or Sorority (which one) _____

I authorize the Office of Student Activities to verify any information on this form including academic information.

Signature

Date

For more information, contact The Office of Student Activities, 706-233-7312 or shortercollegегreeklife@shorter.edu

Please complete this form and return it to:

The Office of Student Activities, 315 Shorter Ave, Rome, GA 30165