



CHAPTER CONTRIBUTION FORM
 "Launching New Dimensions of Educational Excellence"
ALPHA KAPPA ALPHA
EDUCATIONAL ADVANCEMENT FOUNDATION

Attach Payment Here

Must be postmarked by February 1, 2018



Chapter _____ Region _____ Date _____

Chapter Basileus _____

Chapter Address _____

City/State/Zip _____

Email Address _____ Phone _____

Graduate Advisor's Name _____
 (Undergraduate Chapters Only)

Address _____

City/State/Zip _____

Chapter Captain's Name (required) _____

Email Address _____ Phone _____

Required Graduate Chapter Giving Amount

(Based on membership):

- 1-50 \$150
- 51-100 \$200
- 101-150 \$300
- 151-200 \$400
- 201+ \$500

Required Undergraduate Chapter Giving Amount

(Based on membership):

- 1-10 \$25
- 11-25 \$50
- 26-30 \$100
- 31+ \$150

Chapter contributions must be postmarked 2/1/2018 to receive chapter recognition at Regional Conference.

Platinum Formula - Graduate Chapters = Silver + \$1,500
 Platinum Formula - Undergraduate Chapters = Silver + \$500

Silver Level = Chapter Contribution based on the Chapter size (see above guide). \$ _____

Gold Level = Graduate Chapter- Chapter contributes an additional \$500 over and above the Silver Level. \$ _____
 Undergraduate Chapter - Chapter contributes an additional \$250 over and above the Silver Level.

Platinum Level = Chapter contributes an additional \$1,000 graduate chapters over and above the Gold Level and \$250 undergraduate chapters over and above the Gold Level. \$ _____

Individual Donations = (see the Individual Chapter Donation Form). \$ _____

Workplace Giving (CFC) = Dollars will not be recognized until the following year. \$ _____

Phone: 800-653-6528 E-mail: akaeaf@akaeaf.net website: www.akaeaf.org **TOTAL ENCLOSED** \$ _____

1. Send Original to EAF 2. Make copy for your records 3. Send copy to your Regional Coordinator

Make all checks payable to: Educational Advancement Foundation (EAF)

Individual donations over \$250 should not be included in the Chapter contributions. These contributions will receive separate recognition at Boule/Leadership events. If individual donations are to be considered as part of the Chapters Contributions, please complete the attached form.

Check No. _____ Amount \$ _____ Date Received _____