



Please return me to the rolls of active membership. Enclosed are my payments for Grand Tax, Local Dues, and/or a tax-deductible contribution to the Education Foundation. I understand that I may pay with a Money Order, Cashiers Check, or Credit Card.

**Please complete the form below and return it with your payment. A receipt will be returned upon request.**

Account No. or SS No.:					
Full Name:					
Address:					
City:		State:		Zip:	
Home Telephone:		Work Telephone:			
Email Address:					
Date of Birth:		(MM/DD/YYYY)			
Initiation Date:		(MM/DD/YYYY)			
Chapter of Initiation:		Last Chapter Active With:			

Member is now active in:

Chapter		Key No.		Location	
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Reclaimed by: [Brother's Name]		Chapter:	
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**Please select from the following payments:** \*Applies only to college members coming directly out of college.

Alumni Grand Tax	\$150.00
1 <sup>st</sup> Year Alumni*	\$75.00
2 <sup>nd</sup> Year Alumni*	\$112.00 <i>Applies only to college members</i>
College Grand Tax	\$75.00
Late Fee (if paid after November 15)	\$10.00
National Housing & Building Fund	\$100.00 <i>(a one-time only payment)</i>
Total:	
	Cash
	Credit (email: <a href="#">Reclamation Form</a> )
	Check (Mail PO BOX 866, WEST PALM BEACH FL 33402)
Optional Education Foundation Donation (tax deductible)	
\$500	\$250
\$100	\$50

**Credit Card Information - Visa, MasterCard & AMEX**

Type		Credit Card Number		Exp. Date	
Name on Card:					
Signature				Date	

**If Credit Card Payment Return to:**  
**Delta Delta Lambda Chapter Alpha Phi Alpha Fraternity, Inc.**  
**P. O. Box 866, West Palm Beach, FL 33402**  
**Or Email: [Reclamation I am Back](#)**

FOR OFFICE USE ONLY

TRANSACTION DATE:	
PROCESSED BY:	
DATE PROCESSED:	
REMITTANCE NO:	

**Phone: 1.800.373.3089**

**mail: [Reclamation Form](#)**