

Sigma Tau Gamma Fraterntiy  
Delta Upsilon Chapter  
Member Info Form

Please fill out the form and mail it to: Sigma Tau Gamma Delta Upsilon C/O Brian  
Lindner 506 Cherry Ct. Pittsburgh, PA 15237  
You may also email this form to [alumniassoc@sigtauonline.com](mailto:alumniassoc@sigtauonline.com)

Full Name: \_\_\_\_\_

Chapter: Delta Upsilon    School: Penn State University – The Behrend College

Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ **E-mail:** \_\_\_\_\_

Occupation and Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Work Phone: \_\_\_\_\_ **E-mail:** \_\_\_\_\_

Professional Honors/Societies: \_\_\_\_\_

Family: (Wife/Children Date Of Birth /Names)

\_\_\_\_\_  
\_\_\_\_\_

Hobbies/avocations: \_\_\_\_\_

Name of someone who would always have current contact information:

\_\_\_\_\_

**Would you be interested in joining the Alumni Association? Yes No**

If No, can you tell us why? \_\_\_\_\_

\_\_\_\_\_

## Chapter Information

(this information is used to help fill in our chapter history)

Roll #: \_\_\_\_\_

Nickname: \_\_\_\_\_

Pledge Class: \_\_\_\_\_ Date Inducted: \_\_\_\_\_

Big Brother: \_\_\_\_\_

Little Brother(s):

\_\_\_\_\_

\_\_\_\_\_

Fraternity Positions Held: (Chapter President, VP, Social, etc...)

\_\_\_\_\_

\_\_\_\_\_

Hometown: \_\_\_\_\_

Any other information or notes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_