

## 2025 - 2026 JAPA Membership Form Please Print



Name:	daidan Last
	flaiden Last
Address:	
Phone Number: Birth	Date: / Spouse's Name:
Email Address:	College / University:
Sorority: Employer:	·
How did you hear about JAPA:	
Membership Status: ☐ New Member ☐ Sustaining: 1- 19 years ☐ Panhellenic Pearl: 20+ years	
Dues	Directory
☐ Annual Dues: \$40	I would like to receive my directory:
☐ Recent Graduate Dues: \$20.00	☐ Electronic (Free)
(First-time members who graduated 2021–2025)	☐ Printed & picked up at a meeting (Free)
☐ I'd like to purchase a magnetic name tag	☐ Printed & mailed (\$5)
☐ The Fundraising Chair will reach out to you directly	<ul> <li>I acknowledge a \$5 fee will be added to my total</li> </ul>
Photos captured are used for JAPA's marketing material, website and social media. Please refrain from joining photos if you prefer to not have your picture shared.	All JAPA communication will be distributed by email.
Scholarship	Directory Ad
Donation: \$ ☐ In Honor of	Business Name: 1/ Page: \$15
Name:	<ul><li>☐ Business Card: \$10</li><li>☐ ¼ Page: \$15</li><li>☐ ½ Page: \$20</li><li>☐ Full Page: \$40</li></ul>
Address:	Ads are due by September 1, 2025
City, State, Zip Code:	rac are add by coptombor 1, 2020
100% of donations are used for Scholarship awards	
	Directory: \$ ip: \$ Directory Ad: \$
Payment Method	
☐ Check Make checks payable to <i>Jacksonville Alumnae Panhellenic Association</i>	
☐ Square Invoice to the email address provided above  By submitting payment through a Square invoice, I acknowledge and agree to the listed charges for JAPA dues, optional scholarship donation, directory listing, and business ad. A small processing fee has been included to cover Square transaction costs. I accept responsibility for reviewing my selections and keeping a copy of this invoice for my records.	
Return your form (and check) to: Lucy Kazarovich at 13251 Companion Circle South, Jacksonville, FL 32224	