



NEW MEMBER APPLICATION

Name _____

School	Chapter	Degree	Year of Graduation
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*Please provide the name of two DKE Club of New York members as sponsors.
If you do not have two sponsors, the DKE Club will contact you to schedule an interview.*

Sponsor _____ Sponsor _____

How did you learn about the DKE Club of New York?

Professional Information

Title _____

Employer _____

Address _____

City, State ZIP _____

Telephone _____

Email _____

Personal/Home Information

Address _____

City, State ZIP _____

Date of Birth _____

Marital Status/Spouse's Name _____

Telephone _____

Email _____

ATHLETICS PACKAGE: All Members have access to the Club's gym, pool, and fitness facilities on a pay-per-use basis, or a Member may add an "Athletic Package" which includes unlimited use of the gym pool and fitness facilities. The Athletic Package fees are determined by graduation year.

You must opt-into the Athletic Package in order to have it added to your membership.

_____ Initial here to receive details on adding the Athletics Packages to your membership.

SEND STATEMENT TO () BUSINESS () HOME

Upon approval, a separate Yale Club Payment authorization form will be sent to obtain your financial credentials.

I hereby submit an application for membership to The Delta Kappa Epsilon Club of New York and, if accepted, agree to abide by its bylaws and house rules.

Signature _____ Date _____

Submit completed application form together with a current photo to dkeclub@yaleclubnyc.org