



NEW MEMBER APPLICATION

For security purposes, please include a photo with your application.

Name _____

School/Chapter _____

Degree _____

Year of Graduation _____

*Please provide the name of two Deke Club of New York members as sponsors.
If you do not have sponsors, please contact the Deke Club Office to schedule an interview.*

Sponsor _____

Sponsor _____

How did you learn about the Deke 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 gym on a pay-per-use basis or may add the Athletic Package which includes unlimited use of the gym for \$140 (plus tax) per quarter.
You must opt-into the Athletic Package in order to have it added to your membership.

_____ **Initial here to add the Athletic Package to your membership (\$140 per quarter).**

SEND STATEMENT TO () BUSINESS () HOME
() American Express () MasterCard () Visa () Check

Credit Card Number _____ Expiration _____

Dues will be prorated according to the month in which you join. Please make checks payable to The Yale Club of New York City.

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. I acknowledge that I am aware that this membership is only for virtual access at this time as the Clubhouse is currently closed. My membership will include access to the Clubhouse when it has reopened.

Signature _____ Date _____