



**The Grand Chapter**

# **Kappa Alpha Psi® Fraternity Inc.**

TRAINING FOR LEADERSHIP SINCE 1911

## **MEMBERSHIP RECLAMATION FORM**

Full Name: \_\_\_\_\_ Member ID#: \_\_\_\_\_  
Last, First, MI

Current Address:

\_\_\_\_\_  
Street City State zip code

Telephone Number: \_\_\_\_\_ Business Number: \_\_\_\_\_

Chapter of Initiation: \_\_\_\_\_

Date of Initiation: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Address \_\_\_\_\_

### **Reinstatement Fees**

\$150 – Alumni Annual Dues

- If Inactive 4 or more years add \$10
- If Inactive 1-3 years add \$5

\$100 – Housing Assessment Fee (For those initiated before 1990)

**Mail or fax completed form to:  
Kappa Alpha Psi Fraternity, Inc.  
International Headquarters  
2322-24 North Broad Street  
Philadelphia, PA 19132  
(215) 228-7181 (fax)**