

**Phi Beta Sigma Fraternity, Incorporated
State of Alabama
97th State Conference**

March 4-5, 2011
Courtyard by Marriott
Dothan, AL

Delegate Form

Chapter	Location
Primary Delegate	Membership Number
Alternate Delegate	Membership Number

Chapter President Signature: _____ Membership Number: _____

Chapter Treasurer Signature: _____ Membership Number: _____

Note: Your delegate and alternate must be financial on all levels in order to participate in the conference and vote on behalf of your chapter. Likewise, your chapter tax must be paid in order for your chapter to have any representation. Failure to meet any of these requirements may result in the State's refusal to seat your delegate and/or alternate on the conference floor.

Return completed form by February 18, 2010 to:
Phi Beta Sigma Fraternity, Inc.
Alpha Chi Sigma Chapter/2011 State Conference
P.O. Box 6131
Dothan, AL 36303

DO NOT WRITE BELOW THIS LINE

Delegate: Financial ____ Non-financial ____
 Alternate Delegate: Financial ____ Non-financial ____
 Chapter Tax: Financial ____ Non-financial ____
 Chapter: _____ # of Financial Members: _____

Received (Date): _____ Confirmed By: _____