

Membership Application Cover Sheet

Sigma Nu Tau

Entrepreneurship Honor Society



- *To be completed by Faculty Advisor or Faculty Secretary*
- *Attach all membership applications and fees*
- *Please print or type*

School Name: _____

Faculty Advisor/Faculty Secretary: _____

Phone: _____ Fax: _____

Email Address: _____

Address to ship to: _____

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Induction Ceremony Date: ____/____/____ Date Submitted: ____/____/____

Form of Payment	# of Applicants	Amount Enclosed
Check from Chapter/School	_____	\$ _____
Personal Check(s)/Money Orders	_____	\$ _____
Credit Card Payments	_____	\$ _____
# of Honor Cords	_____	\$ _____
Total		\$ _____

List of member applications attached – **Please PRINT:**

Over →

I certify that each attached member applicant has signed the membership pledge.

Faculty Advisor or Faculty Secretary Signature

Please remit to:
Sigma Nu Tau Entrepreneurship Honor Society
c/o USASBE
100 N. Merchant St., Decatur, IL 62523
(202)-330-9331 (phone) SigmaNuTau@usasbe.org