

Entrepreneur *or* Honorary Member Application

Sigma Nu Tau

Entrepreneurship Honor Society



Please print or type – To be completed by prospective member or nominator

Type of Membership (Check *only* 1): ☐ Entrepreneur Member ☐ Honorary Member

Check one: ___ Mr. ___ Ms. ___ Mrs. ___ Dr. ___ Prof. ___ Other [Please state: _____]

Name: _____

Please **type or print** your name above *exactly as you would like it to appear* on your certificate.

Address: _____

Email: _____

Phone: _____ **Fax:** _____

List Entrepreneurial Ventures and Professional Activities (Include Position Titles & Dates):

List Academic Degree(s) Earned and Granting Institution(s):

This membership application is for the _____

Chapter of Sigma Nu Tau Entrepreneurship Honor Society. (School Name)

I would like to order the following:

\$___ Initiation/Lifetime Membership fee of \$50.00 (required)

\$___ Honor Cord @\$10 (optional)

\$___ ***Entrepreneur*** Subscription (Free to US addresses; \$20 supplement to Canada; \$30 to other countries)

\$___ Tax-Deductible donation to the Sigma Nu Tau Scholarship fund

\$___ Total Enclosed

Form of Payment: ___ Cash ___ Check/Money Order (Payable to Sigma Nu Tau Entrepreneurship Honor Society)

___ Credit card [**provide email address below** (Not credit card #). An invoice will be emailed directly to you]

Email: _____

Membership Pledge

As a condition of membership, I pledge to be a model of principled entrepreneurship and to conduct myself with honor and integrity in all my academic, personal, and professional endeavors.

Signature of Applicant

Date

Please submit to Chapter Faculty Advisor or Faculty Secretary who will remit to:
Sigma Nu Tau Entrepreneurship Honor Society
c/o USASBE

100 N. Merchant St., Decatur, IL 62523
(202)-381-9330 (phone) SigmaNuTauE@usasbe.org