

# National Philo Affiliates of Sigma Gamma Rho Sorority, Inc.

**Reinstatement/Transfer Form**

**Instructions: Please use this form to accompany your Remittance Report and funds to the National Financial Secretary. This form will also be used to update individual records.**

**Check One Reactivation Transfer**

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Philo Affiliate

Last Name First Name MI

Address City

State Zip

Home Phone Work Phone

E-mail Cell Phone

Former Name (Only if you have remarried or your name changed)

Former Address (If your address has changed from the one on file)

City State Zip

Current Chapter Are you financial? Inception Chapter Date Transfer Chapter

Last Active/Transfer Date