



Dear Soror,

Tau Omicron Zeta Chapter of Hephzibah wants to thank you for expressing interest in joining our chapter. We understand life happens that would cause you to become inactive or transfer to a new location. No matter the reason, we welcome you back with open arms. To reactivate your membership, you must:

- Be in good standing with your previous chapter
- Produce a transfer card.
- Pay all fees (local, state, regional and national)
- Fill out the attached forms
- Attach a copy of your membership card or certificate for verification

Again, thank you for choosing Tau Omicron Zeta Chapter of Hephzibah to be your new Zeta home. Please feel free to contact our membership coordinator at TOZmembership1920@gmail.com if you have any questions.

Sisterly,

Keisha Williams

Keisha Williams
Tau Omicron Zeta Chapter
Membership Coordinator



Zeta Phi Beta Sorority, Inc.
Tau Omicron Zeta Chapter

MEMBER INFORMATION

Name		DOB
Address		
Home Telephone		
Other Telephone		
Email Address		
Occupation		
Hobbies/Special Interest		
Initiated where/when		
Member ID Number		
CHAPTER AFFILIATIONS		
Undergraduate		
Graduate		
Current Status (Circle One)	Active	Inactive
If active, Reason for Chapter Transfer Request		
If Inactive, Reason & Length of Inactivity		
OFFICE POSITIONS HELD WITHIN ZETA		
Office(s)	Year(s)	Undergraduate(U) Graduate(G) or Both(B)
Conferences Attended:		
Have you worked on any committees?	Yes	No
If Yes, Please list committee & period of service.		
When would you like to return to active status?		

~Please attach a copy of your membership card~



Zeta Phi Beta Sorority, Incorporated Notarized Transfer Request Letter

I, _____, was a member of _____
Your Name **Name of Your Last Chapter**

chapter located at/in _____
Chapter Location (University/City/State)

I do hereby certify that I was in _____ a member of this chapter, in good
Year
standing and not under charges.

I am pursuing membership in _____
Name of Chapter you are seeking new membership

Signed: _____ Date: _____

Notary _____ Date: _____

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**Zeta Phi Beta Sorority, Incorporated
Transfer Request Card**

We, the Members and Officers of _____ Chapter located at/in _____
School name if applicable, and city & state
do hereby certify that Soror _____ is/was in _____ a Member of this Chapter, in good
Year
standing and not under charges.

Chapter Basileus

Chapter Grammateus

(Do not write below this line)

Date Approved _____

ID# _____

Required

By _____ Executive Director