

Soror's Name \_\_\_\_\_ Date \_\_\_\_\_



Milwaukee Alumnae Chapter  
Delta Sigma Theta Sorority, Incorporated  
Member Profile

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Information collected in this Member Profile is strictly confidential and only for use in the event of the passing of a duly initiated member of Delta Sigma Theta Sorority, Incorporated and for historical recordkeeping. This information will not be used for any other purposes without the consent of the member.

<b>PERSONAL INFORMATION</b>		
Name:		
Address:		
City:	State:	Zip Code:
Phone # (home):	Phone # (cell):	
Phone # (work):	E-Mail:	
Date of Birth:	Place of Birth:	
Parents:		
Marital Status:	Spouse's Name:	
Children:		
Grandchildren:		
<b>FAMILY MEMBER(S) TO BE CONTACTED</b>		
Name 1:	Relationship:	
Address:		
City:	State:	Zip Code:
Phone # (home):	Phone# (cell):	
Phone # (work):	E-Mail:	
<b>FAMILY MEMBER(S) TO BE CONTACTED</b>		
Name 2:	Relationship:	
Address:		
City:	State:	Zip Code:
Phone # (home):	Phone# (cell):	
Phone # (work):	E-Mail:	

## Member Profile (cont.)

<b>DELTA INFORMATION</b>
Name at time of initiation:
Chapter and place of initiation:
Date (or year) of initiation:
Membership category (Golden Life, Diamond Life, Regular):
Current chapter membership:
Previous chapter membership(s):
Chapter offices held, committees chaired, committee memberships:
National or Regional offices held:
National or Regional committees chaired or committee memberships:
National Conventions attended:
Regional Conferences attended:
State Clusters attended:

Member Profile (cont.)

Soror's Name: \_\_\_\_\_

**OMEGA OMEGA SERVICES**

Do you wish to have an Omega Omega Service upon your passing? Yes or No

Would you like the Omega Omega service to be held at a different time or as a part of your funeral service?

If at a different time or place, please give a suggested time and place:

Please list the name of a special soror or other sorors who are most familiar with your Delta, professional and/or personal activities who you wish to be contacted to participate in the Omega Omega service (please use the back of this form for additional names):

Name 1: \_\_\_\_\_ - Ceremonial Special Soror

Address:

Phone # (home):

Phone # (cell):

Name 2:

Address:

Phone # (home):

Phone # (cell):

Name 3:

Address:

Phone # (home):

Phone # (cell):

Special song:

Preferred soloist or to be sung by membership?

Name of soloist:

Are there other sorors, in addition to the Milwaukee Alumnae Chapter members, that may be in other chapters that you wish to be notified?

Name:

Address:

Phone # (home):

Phone # (cell):

Name:

Address:

Phone # (home):

Phone # (cell):

## Member Profile (cont.)

### **OMEGA OMEGA SERVICES (cont.)**

Do you have a soror or sorors designated to receive your Delta collectibles (including confidential materials such as Rituals, Constitution and By-Laws, Protocol Handbook, Sorority Pin, jewelry with Delta insignia or Delta symbols, t-shirts, or other paraphernalia)?

Yes or No                      Contact Name:    Phone #:

If you do not have a soror designated, would you agree to have your Delta collectibles transferred to the chapter archives?

Yes or No

Will you bequeath a gift to Delta?    Yes or No

Have you included this provision in your Will/Trust or final documents?    Yes or No

### **EDUCATION**

College/University:

Degree(s) earned:

College/University:

Degree(s) earned:

Other:

Degree or certificate(s):

### **PROFESSIONAL INFORMATION**

Career(s):

### **COMMUNITY INVOLVEMENT/ORGANIZATIONS**

### **HONORS/AWARDS**

Public:

Professional:

## Member Profile (cont.)

Briefly summarize anything else that you would like others to know about you.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return signed copy via:

U.S. mail: Milwaukee Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
Post Office Box 18630  
Milwaukee, Wisconsin 53218

or

E-mail: [heritagearch.dstmke@gmail.com](mailto:heritagearch.dstmke@gmail.com)  
(Make sure a signature is included on the emailed copy)

Note:

Please keep a copy of this document for your records and share the information with your family.

Milwaukee Alumnae Chapter  
Historian and Heritage & Archives Committee

March, 2018