



Beta Omega Psi

MEMBERSHIP APPLICATION



Thank you for considering Beta Omega Psi Veterans Fraternity/Sorority, Incorporated. We are dedicated to our founding qualities: Honor, Integrity, Respect and Empowerment. This application focuses on Honor and Integrity. We will need substantiating proof that you were in good standing with the military. Below are the instructions for completing the application.

INSTRUCTIONS

1. Completed Membership Application (see below)

2.) Proof of Military Service (Black out SSN and Pay Information) You must submit a Discharge or Retirement Orders, OR DD214.

Our Applications Manager is available to help you with this process. The Applications Manager can be contacted via text, phone or e-mail at (313) 758-7885 or sis.remarkable@betaomegappsi.org with any questions regarding this application.

PERSONAL INFORMATION

***Required**

***First Name**

***Middle Name**

***Last Name**

***Address**

***City**

***State**

***Zip**

***Email**

***Gender**

***Marital Status**

***Date of Birth**

***Shirt Size**

***Jacket Size**

MILITARY INFORMATION

Branch Affiliation

Highest Rank

Current Status

***Discharge Type**

Disabled Veteran

Are you Service Connected?

MEMBER REFERRAL

First Name

Last Name

Who referred you to our organization?

How did you hear about this organization? Please let us know how you found out about this organization. Please indicate by name if possible. Example: I found out from Facebook on John Smith's page.	
List the Greek Fraternity or Sorority, any Military Fraternity or Sorority, or service related organization with which you are affiliated. If you are not affiliated with any, type "N/A".*	
REFERENCE INFORMATION	
Reference First Name	Reference Last Name
Reference Phone	Reference Email
SUPPORTING DOCUMENTATION	
Please Attach Documents: DD214, Discharge Certificate	
SIGNATURE & DATE	
SIGNATURE	DATE
FINANCIAL INFORMATION	
All Applicants are required to pay \$405.00 initial membership fee.	All members are required to pay a \$600.00 membership yearly renewal fee.
PAYMENT ARRANGEMENTS OPTIONS	
OPTION 1	\$405 – Paid in Full: This payment will be due 3 days after your acceptance
OPTION 2	\$202.50 – Down Payment: This payment will be due BEFORE the start of Intake. \$202.50 – Remaining Payment: This payment will be due by the end of Week 3 of the intake process.
Applicants must complete a 6-week new members' educational seminar.	Applicants must complete 10 hours of community service.
PAGE 2	

REFUND POLICY	
Refunds are only acknowledged for applicants who withdraw from the intake line. The refund policy is as follows:	• Week 1 - 75% of what you paid • Week 2 - 50% of what you paid • NO REFUNDS AFTER WEEK 2
Once you select an option, you will be sent an invoice based on the option selected.	