



# PBS-1 - 2016 FEE SCHEDULE

FEES ARE SUBJECT TO CHANGE AT ANY TIME  
FORM EXPIRES 12/31/16

PHI BETA SIGMA FRATERNITY, INCORPORATED

Department of Finance and Operations

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## SECTION A.

A1. National Dues:	ALUMNI/LATE	COLLEGIATE/LATE
	<b>\$150.00/\$165.00</b>	<b>\$80.00/\$88.00</b>
A1. 2016 Dues will be considered late after December 31, 2015		
A1. Life Members only pay Annual Regional Dues		
A2. The Reinstatement Fee is \$12.50 and is already included in A2 (Reinstatement totals)		
A3. Member Reclamation Totals		
A4. New Member Fee Totals (A4) include the following:		
	ALUMNI	COLLEGIATE
Application Fee	<b>\$200.00</b>	<b>\$200.00</b>
HQ Building Assessment	<b>\$100.00</b>	<b>\$100.00</b>
Membership Certificate	<b>\$10.00</b>	<b>\$10.00</b>
Publication Fee	<b>\$10.00</b>	<b>\$10.00</b>
Constitution	<b>\$15.00</b>	<b>\$15.00</b>
National Dues (2 years)	<b>\$300.00</b>	<b>\$160.00</b>
Fraternity Pin	<b>\$155.00</b>	<b>\$155.00</b>
History Book	<b>\$75.00</b>	<b>\$75.00</b>
Regional Dues (2 years)	<b>(Varies per Region)</b>	

## SECTION B.

B7. Charter Fee Totals (B7) include the following:		
	ALUMNI	COLLEGIATE
Application Fee	<b>\$25.00</b>	<b>\$25.00</b>
HQ Building Assessment	<b>\$150.00</b>	<b>\$150.00</b>
Chapter Tax	<b>\$125.00</b>	<b>\$75.00</b>
Chapter Liability Insurance	<b>\$400.00</b>	<b>\$375.00</b>
Constitution	<b>\$15.00</b>	<b>\$15.00</b>
Chapter Intake Guide	<b>\$25.00</b>	<b>\$25.00</b>
Charter Certificate	<b>\$100.00</b>	<b>\$100.00</b>

## SECTION C.

C1. You **MUST** be financially active to order a duplicate membership card

## SECTION A. INDIVIDUAL MEMBER ASSESSMENTS

A1. Annual Dues	EA	GL	GC	SE	SO	SW	WE
Alumni (National and Regional Dues Total)	<b>\$180.00</b>	<b>\$180.00</b>	<b>\$174.00</b>	<b>\$175.00</b>	<b>\$165.00</b>	<b>\$175.00</b>	<b>\$180.00</b>
Late Alumni (after 12/31)	\$198.00	\$198.00	\$191.40	\$192.50	\$181.50	\$192.50	\$198.00
Life Member (Regional Dues Only)	<b>\$30.00</b>	<b>\$30.00</b>	<b>\$24.00</b>	<b>\$25.00</b>	<b>\$15.00</b>	<b>\$25.00</b>	<b>\$30.00</b>
Late Life Member (after 12/31)	\$33.00	\$33.00	\$26.40	\$27.50	\$16.50	\$27.50	\$33.00
Collegiate / Associate (National and Regional Dues Total)	<b>\$95.00</b>	<b>\$90.00</b>	<b>\$92.00</b>	<b>\$95.00</b>	<b>\$87.50</b>	<b>\$95.00</b>	<b>\$100.00</b>
Late Collegiate (after 12/31)	\$104.50	\$99.00	\$101.20	\$104.50	\$96.25	\$104.50	\$110.00
<b>A2. Member Reinstatement</b>							
Alumni (National & Regional Dues + Reinstatement Fee)	\$192.50	\$192.50	\$186.50	\$187.50	\$177.50	\$187.50	\$192.50
Collegiate (National & Regional Dues + Reinstatement Fee)	\$101.25	\$96.25	\$98.25	\$101.25	\$93.75	\$101.25	\$106.25
<b>A3. Member Reclamation</b>							
Alumni <b>ONLY</b> (Must be sent along with reclamation materials)	\$202.50	\$202.50	\$196.50	\$197.50	\$187.50	\$197.50	\$202.50
<b>A4. New Member Fee Totals</b>							
Alumni (w/ History Book)	\$925.00	\$925.00	\$913.00	\$915.00	\$895.00	\$915.00	\$925.00
Collegiate (w/ History Book)	\$755.00	\$745.00	\$749.00	\$755.00	\$740.00	\$755.00	\$765.00
<b>A5. Life Membership Fee</b>							
Must have 10 consecutive years of active membership	Gold Level: \$1,500.00	Sapphire Level: \$2,400.00	Platinum Level: \$5,000.00				

## SECTION B. CHAPTER ASSESSMENTS

	Alumni	Collegiate
B1. Annual Chapter Tax	\$125.00	\$75.00
Late Annual Chapter Tax (after 12/31)	\$150.00	\$100.00
B2. Annual Chapter Liability Insurance	\$400.00	\$375.00
B3. Chapter Reinstatement Fee	\$25.00	\$25.00
B4. Headquarters Building Assessment	\$150.00	\$150.00
B5. 2015 Conclave Absentee Fee	\$525.00	\$425.00
B6. Risk Mgt Insurance Contribution	\$15.00	\$15.00
B7. Charter Fee Totals	\$840.00	\$765.00
B8. Charter Certificate	\$100.00	\$100.00

## SECTION C. MEMBER MATERIALS

C1. Membership Card	Included in 2016 Dues
C2. Membership Card Re-Order	\$10.00
C3. Membership Certificate	\$10.00
C4. Life Membership Certificate	\$10.00
C5. Life Membership Certificate (w/ frame)	\$75.00
C6. Membership Pin	\$155.00
C7. Life Member Pin	\$240.00
C8. Constitution	\$15.00
C9. Sigma Light	\$15.00
C10. History Book	\$75.00
C11. History Book (w/Past President Signatures)	\$125.00
C12. History Book (w/Leather Cover)	\$150.00



# PBS-1 - 2016 ORDER FORM

FEES ARE SUBJECT TO CHANGE AT ANY TIME  
FORM(S) OF PAYMENT MUST BE:

1. MONEY ORDER
2. CERTIFIED CHAPTER CHECK (NO PERSONAL CHECKS)
3. CREDIT CARD AUTHORIZATION (SUBMIT CC AUTH. FORM)
4. CASHIER'S CHECK

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## PERSON COMPLETING ORDER

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE: \_\_\_\_\_

Check One:

- Individual Member (non-officer)     Advisor  
 State/ Area Director     Chapter Officer  
 If Chapter Officer, Title: \_\_\_\_\_

## CHAPTER INFORMATION

CHAPTER: \_\_\_\_\_

Region (Check One):

- Eastern     Gulf Coast     Great Lakes  
 Southeastern     Southern     Southwestern  
 Western

## WHERE DO YOU WANT YOUR MATERIALS SHIPPED?

Attn to: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

## SECTION A. INDIVIDUAL MEMBER ASSESSMENTS

	A1	A2	A3	A4	A5	Member #	Last Name	First Name	Amount
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
	Address: _____								
	Email: _____								
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
	Address: _____								
	Email: _____								
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
	Address: _____								
	Email: _____								
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
	Address: _____								
	Email: _____								
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
	Address: _____								
	Email: _____								
6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
	Address: _____								
	Email: _____								

**SECTION A. SUB-TOTAL: \$ \_\_\_\_\_**

## SECTION B. CHAPTER ASSESSMENTS

B1. \$ _____	B2. \$ _____
B3. \$ _____	B4. \$ _____
B5. \$ _____	B6. \$ _____
B7. \$ _____	B8. \$ _____
B9. \$ _____	

**SECTION B. SUB-TOTAL: \$ \_\_\_\_\_**

## GRAND TOTAL SUBMITTED:

**\$ \_\_\_\_\_**

## SECTION C. MEMBER MATERIALS

	C1	C2	C3	C4	Member #	Last Name	First Name	Amount
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	\$ _____
	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
C5.	_____	\$ _____	C6.	_____	\$ _____	C7.	_____	\$ _____
C9.	_____	\$ _____	C10.	_____	\$ _____	C11.	_____	\$ _____
						C8.	_____	\$ _____
						C12.	_____	\$ _____

**SECTION C. SUB-TOTAL: \$ \_\_\_\_\_**