

The Delta Kappa Gamma Society International  
NY State ~ \_\_\_\_\_ Chapter

## Chapter Website & Print Information Release Form

A **Release Form** needs to be placed on file before information about you can be placed on the website or in print. Please print, complete, sign and mail this form to \_\_\_\_\_ by \_\_\_\_\_.

*Thank you for your prompt response.*

Check "Yes" or "No" for the items listed in the box below.

I grant permission for the following information to be listed on the NY State Website & <i>Pi Lights</i> and Chapter Newsletter & Website.	Yes	No
My Name:	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail Address:	<input type="checkbox"/>	<input type="checkbox"/>
My Chapter Name:	<input type="checkbox"/>	<input type="checkbox"/>
News about me as individual:	<input type="checkbox"/>	<input type="checkbox"/>
News about me in group news:	<input type="checkbox"/>	<input type="checkbox"/>
Individual picture:	<input type="checkbox"/>	<input type="checkbox"/>
Group picture:	<input type="checkbox"/>	<input type="checkbox"/>

Name (please print) \_\_\_\_\_

Pi State Position \_\_\_\_\_

Chapter Position(s) (including Officer, Chair and Committee Member):

\_\_\_\_\_  
\_\_\_\_\_

Email address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Your address and phone number will **NOT** be listed on the NY State or Chapter Websites. If otherwise needed, it will be taken from the NY State or Chapter Directory.

This form may be printed and given to \_\_\_\_\_ at \_\_\_\_\_ Meeting or mailed by regular mail by \_\_\_\_\_ to: