



# Alpha Phi Omega Greater Los Angeles Alumni Association

## REGISTRATION FORM

### PART I

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
CHAPTER: \_\_\_\_\_ BATCH YEAR: \_\_\_\_\_  
SCHOOL: \_\_\_\_\_ ID NO. (If any) \_\_\_\_\_  
WERE YOU RITUALIZED? ☐ YES ☐ NO  
HAVE YOU BEEN A MEMBER OF OTHER APO ALUMNI ASSOCIATION? ☐ YES ☐ NO  
WHICH ALUMNI ASSOCIATION? \_\_\_\_\_  
OTHER GROUP MEMBERSHIP ASIDE FROM APO: \_\_\_\_\_

SPOUSE'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
NAME OF CHILDREN: \_\_\_\_\_  
1.) \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
2.) \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
3.) \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
4.) \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
5.) \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ENDORSED BY: \_\_\_\_\_ ☐ APOGLA ☐ SAME CHAPTER ☐ APO-PHIL NAT OFC.  
PRINT NAME

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

### PART II

I, \_\_\_\_\_, a bonafide member of Alpha Phi Omega Los Angeles, do solemnly promise that I will abide, follow, and uphold all the provisions of the Constitution and By-laws and its Policy & Procedure. I shall, in all my dealings, respect and act in my thoughts, words and deeds the dignity of being an APOGLA member.

I further pledge to pursue the ideas and objectives of APOGLA to be the prime example in Leadership, Friendship and Service.

I further swear to help and promote the development of APOGLA to support in whatever way I can in the implementation of its projects and activities. I also vow to advance the development of our members and uplift the quality of life of the people in our nation, organization, community and its members. All these I do promise, So Help me God.

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