

## GREEK PICTURE CHAIRMAN FORM

Please complete all of the important contact information below. Please print clearly.

### PICTURE CHAIRMAN CONTACT INFORMATION

First Name ( )	Last Name ( )		
Cell Phone	Summer Phone		
School Email Address	Summer Email Address		
PC Mailing Address	City	State	Zip

### ORGANIZATION CONTACT INFORMATION

President Name	Email Address	Phone ( )	
Housemother Name	Email Address	Phone ( )	
Advisor Name	Email Address	Phone ( )	
Organization Mailing Address / /	City	State	Zip
Officer Elections			

### SHIPPING OF MASTER COMPOSITE AND COPIES

No PO Box addresses are accepted. The Master Composite may require signature upon delivery. Additional charges will apply for refused or returned packages.

- Picture Chairman Mailing Address       Organization Mailing Address

### EMAIL PROOF OF FINAL COMPOSITE

An electronic copy of your composite will be emailed to the person listed below to verify accuracy of the final product.

Member Name	Member Title (If applicable)
Email Address 1	Email Address 2 (If Applicable)

**PLEASE NOTE:** After acceptance of the proof, costs of a replacement composite for errors not noted will be the responsibility of the organization. Carefully proof your composite to prevent additional charges.