



**STATE UNIVERSITY OF  
NEW YORK AT NEW PALTZ**  
*Student Activities and Union Services*  
Student Union Building, Room 209  
845-257-3025

## **FRATERNITY & SORORITY CHAPTER INTAKE ABSTENTION FORM**

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***This form must be submitted to the Office of Student Activities and Union Services if your chapter is not having New Members for the Spring 2009 Semester.***

**Submit completed form to SUB 209 NO LATER THAN 12PM ON FRIDAY, SEPTEMBER 4<sup>th</sup>, 2009.** *Failure to submit this form by 12PM will result in your organization's ineligibility to participate in the Club & Involvement Fair.*

*As the President, I hereby declare that my chapter will not have New Members in the Fall 2009 semester. My signature indicates that I understand that this decision is final once this form is submitted to the Office of Student Activities and Union Services.*

**Fraternity/Sorority:** \_\_\_\_\_

**Chapter:** \_\_\_\_\_

**President's Name:** \_\_\_\_\_

**President's Signature:** \_\_\_\_\_

**Advisor's Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_

Office Use Only:

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Assistant Director Signature