

Chapter Name  Chapter Number  Chapter Type

Form 50

Chapter Address

City  State  Zip

Basileus Alternate Email  Website

## OMEGA PSI PHI FRATERNITY, INC.

### CHAPTER OFFICERS

Start Date

**Note:** Please complete this form and send a copy to the International Office and a copy to your local District Representative. You may submit this form online to the International Office by clicking the "Email Form" button at the bottom of the page.

CHAPTER POSITION	BROTHER'S NAME	CONTROL#	WORK PHONE	HOME PHONE	OFFICIAL EMAIL ADDRESS ASSIGNED ***
*** Such as " <b>alpha</b> basileus@oppf.org"), where <b>alpha</b> is your chapter name. The EMAIL ADDRESS fields listed below are not entry fields. They are only intended to indicate the general structure of your IHQ-assigned address.					
Basileus	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	alphabasileus@oppf.org
Immediate Past Basileus	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Vice Basileus	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	alpha1vb@oppf.org
Keeper of Recds. and Seal	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	alphakrs@oppf.org
Keeper of Finance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	alphakf@oppf.org
Chaplain	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	alphachaplain@oppf.org
Editor	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	alphaeditor@oppf.org
Chapter Advisor	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

NOTE: If this form is saved for later submission as an email attachment, be certain to email to **form50@oppf.org**