



My Quill Badge Request Form

Once you have filled out the information below, please keep a copy of this form with your Quill badge so that your loved ones know what to do with your Quill after you enter Chapter Eternal.

First Name: _____

Maiden Name: _____

Last Name: _____

Member Number (likely engraved on the back of the badge): _____

Initiating Chapter: _____

Initiating University: _____

Upon my death, please do the following with my Quill badge:

_____ Bury me with my Quill badge.

_____ My badge may be left to a chapter or another Alpha Xi Delta member. Please leave it to:

First and Last Name: _____

Chapter and University: _____

Phone Number: _____

Address: _____

Email Address: _____

Any Special Instructions: _____

_____ Return my badge to Alpha Xi Delta Fraternity Headquarters (FHQ). Please include this paper in the envelope that has my name, initiating chapter and university and an obituary so that FHQ can update their member records. The address is 8702 Founders Road, Indianapolis, IN 46268.