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Lynchburg College

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Lynchburg College Fraternity/Sorority Life

Form 2: Advisory Board Listing

Please fill out completely. If your chapter does not have an advisor for a particular area, please indicate to whom questions should be directed.

Fraternity/Sorority Name: _____ Chapter: _____ Date: _____

Person Completing this Form: _____

Chapter Advisor: _____
 Phone number: _____ Email: _____
 Address: _____

Faculty Advisor: _____
 Phone number: _____ Email: _____
 Department: _____

Financial Advisor: _____
 Phone number: _____ Email: _____
 Address: _____

Recruitment Advisor: _____
 Phone number: _____ Email: _____
 Address: _____

National Representative/Consultant/Regional Director or Province Chairman:

 Phone number: _____ Email: _____
 Address: _____

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 Send comments, questions about the Lynchburg College website to webmaster@lynchburg.edu
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