APPLICATION FOR AN OMEGA PSI PHI FRATERNITY LICENSE PLATE

Remit a \$20.00/\$50.00 check or money order with this application.

First in Flight BackgroundFirst in Freedom Background		□ Regular Omega Psi Phi Fraternity \$20.00 □ Personalized Omega Psi Phi Fraternity \$50.00				
NOTE: You are allowed four (4) spaces for a personalized message Q					_ Q	
When applying for a Personalized Ome four (4) spaces for a Personalized messa. Choice cannot conflict with another class. The \$20.00/\$50.00 specific content in the second conflict with another class.	age. The four spaces may be a combin	ation of letters and	numbers, but	cannot be n	umbers only.	
Home	NAME(To agree with certificate of					
	FIRST	MIDDLE		LAST	<u>Γ</u>	
AREA CODE-TELEPHONE NUMBER Office		ADDRESS				
AREA CODE-TELEPHONE NUMBER	CITY	STATE		ZIP CODE	<u> </u>	
	Current North Carolina ———————————————————————————————————	Vehic	Vehicle Identification Number			
	Driver License #	Year	Model	Make	Body Style	
I CERTIFY FOR THE MOTOR VE	Owner's Certification of Liab		JSIBILITY AS R	EOUIRED BY	LAW.	
PRINT OR TYPE FUL	L NAME OF INSURANCE COMPANY AUTH	HORIZED IN N.C. – N	OT AGENCY OR	GROUP		
POLICY N	UMBER – IF POLICY NOT ISSUED, NAME (OF AGENCY BINDING	G COVERAGE			
SIGNATURE OF OWNER			DATE OF CERTIFICATION			