



*An IRS-approved 501(c)(3) non-profit organization since 1991*  
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**\*\*\*\*\* MEMBERSHIP PROFILE\*\*\*\*\***

**PERSONAL INFORMATION:**

LAST NAME: FIRST NAME: NICKNAME:

BIRTHDAY: MARITAL STATUS: GENDER:

ADDRESS: (Street, City, State, Zip Code) CELL PHONE:

EMAIL ADDRESS: ALTERNATIVE EMAIL:

OCCUPATION/BUSINESS: TITLE:

HOMETOWN/ORIGIN: LANGUAGE/DIALECTS SPOKEN:

Expertise/Talent (ex. Video production, marketing, writing, etc.)

**FAMILY INFORMATION:**

NAME RELATIONSHIP BIRTHDAY

**COMMUNITY INVOLVEMENT AND ADVOCACIES**

Advocacies: (Calamity/disaster relief, orphans, education, family violence, cancer etc.)

**Other Organizational Involvement:**

Name: Position/Office:

Signature: Date:

PCCI Recommending Member: \_\_\_\_\_

Endorsed by VP-Membership: \_\_\_\_\_

Presentation to the Board (Secretary Signature) \_\_\_\_\_