



# PHILIPPINE COMMUNITY OF SOUTHERN NEW JERSEY, INC. (PCSNJ, INC.)

205 South White Horse Pike, Stratford, New Jersey 08084

## MEMBERSHIP APPLICATION

Date of Application: \_\_\_\_\_

### PERSONAL INFORMATION *(Please print clearly)*

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	FIRST NAME	MIDDLE INITIAL	LAST NAME	
STREET ADDRESS/NUMBER				
CITY	STATE	ZIP	COUNTY	
TELEPHONE	HOME	CELLPHONE	WORK	EMAIL ADDRESS
DATE OF BIRTH (MM/DD/YYYY)		OCCUPATION (OPTIONAL)		
SPOUSE	FIRST NAME	MIDDLE NAME	LAST NAME	

### CHILDREN *(Use reverse side for additional space)*

NAME	DATE OF BIRTH	INTERESTS
NAME	DATE OF BIRTH	INTERESTS
NAME	DATE OF BIRTH	INTERESTS

### ACTIVITIES OF INTEREST

<input type="checkbox"/> By-Laws	<input type="checkbox"/> Charity	<input type="checkbox"/> Choir	<input type="checkbox"/> Christmas Extravaganza	<input type="checkbox"/> Donations/Grants
<input type="checkbox"/> Education	<input type="checkbox"/> Filipiniana	<input type="checkbox"/> Fund Raising	<input type="checkbox"/> Game Night	<input type="checkbox"/> Gazette
<input type="checkbox"/> Induction Ball	<input type="checkbox"/> Line Dancing	<input type="checkbox"/> Membership	<input type="checkbox"/> Picnic	<input type="checkbox"/> Scholarship
<input type="checkbox"/> Sports	<input type="checkbox"/> Youth	<input type="checkbox"/> Zumba/Health & Wellness	Other _____	

### MEMBERSHIP CATEGORIES

- Lifetime (Individual) **\$100.00**
- Former Philippine Community Youth (PCY) Member **\$50.00** \*(prior age 21)
- Yearly Membership **\$25.00**
- Yearly PCY Membership **\$5.00**
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### SIGNATURE

Make cheques payable to **PCSNJ, INC.** Return application along with the Membership fee to:

**Sylvia F. Tagle**  
Membership Chairperson  
205 South White Horse  
Pike Cherry Hill, NJ 08003

RECOMMENDED BY:

\_\_\_\_\_  
1 PRINTED NAME DATE

\_\_\_\_\_  
2 PRINTED NAME DATE

APPROVED BY:

\_\_\_\_\_  
PRINTED NAME DATE