



PCI Committee Member Application

MAIL TO:
PCI MEMBER SERVICES
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Please complete all sections and sign at the bottom.

NAME <input type="checkbox"/> MR. <input type="checkbox"/> MS. <input type="checkbox"/> DR. <input type="checkbox"/> PROF.
COMPANY NAME AND ADDRESS
TYPE(S) OF PCI MEMBERSHIP (CHECK ALL THAT APPLY) <input type="checkbox"/> PRODUCER <input type="checkbox"/> SUPPLIER ASSOCIATE <input type="checkbox"/> ERECTOR ASSOCIATE <input type="checkbox"/> SERVICES ASSOCIATE <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> AFFILIATE <input type="checkbox"/> LIFE
JOB TITLE
JOB EXPERIENCE (LIST BRIEFLY JOB HISTORY, OR ATTACH RESUME/CURRICULUM VITAE)
YOUR CONTACT PHONE NUMBER
EMAIL
GENERAL AREAS OF EXPERTISE (CHECK ALL THAT APPLY) <input type="checkbox"/> ENGINEERING <input type="checkbox"/> MATERIALS <input type="checkbox"/> ARCHITECTURE <input type="checkbox"/> BUSINESS MANAGEMENT <input type="checkbox"/> PRODUCTION <input type="checkbox"/> ERECTION <input type="checkbox"/> FINANCIAL <input type="checkbox"/> SALES <input type="checkbox"/> SAFETY <input type="checkbox"/> QC/QA <input type="checkbox"/> R&D <input type="checkbox"/> PROJECT MANAGEMENT <input type="checkbox"/> DRAFTING <input type="checkbox"/> OTHER _____
COMMITTEES YOU WISH TO JOIN (PLEASE DO NOT SELECT MORE THAN THREE AND RANK IN ORDER OF YOUR PREFERENCE) AND TYPE OF MEMBERSHIP (VOTING OR CORRESPONDING) EXAMPLE: MEMBERSHIP COMMITTEE.CORRESPONDING MEMBER 1. _____ 2. _____ 3. _____
PLEASE NOTE: Applying for committee membership does not guarantee appointment. PCI committee membership is appointed on a first-come-first-served basis after any membership and expertise requirements have been satisfied. In addition, some committees are filled by invitation only. If you are interested in joining a committee that is by invitation only, your application will be sent to the chair for consideration when a spot opens on the committee.
BY SIGNING THIS APPLICATION, YOU AGREE TO THE FOLLOWING: 1. TO COMPLY WITH ALL PCI POLICIES AND PROCEDURES 2. TO ABIDE BY THE PCI ANTITRUST POLICY 3. TO REPORT ANY CONFLICT OF INTEREST IN REGARD TO YOUR PARTICIPATION IN COMMITTEE WORK AND ACTIVITIES 4. THAT ALL CONTRIBUTIONS MADE BY YOU WILL BECOME THE PROPERTY OF PCI AND YOU AGREE TO RELEASE ALL COPYRIGHTS TO PCI 5. TO ATTEND THE REQUIRED MEETINGS AND BE AN ACTIVE MEMBER OF THE COMMITTEE
..... SIGNATURE DATE