



## Lady of PSB Membership Application

NEW MEMBERSHIP

RENEWAL

### MEMBER CONTACT INFORMATION

<b>TITLE</b>	<input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms		
<b>NAME</b>			
<b>ADDRESS 1</b>		<b>MOBILE PHONE</b>	
<b>ADDRESS 2</b>		<b>WORK TELEPHONE</b>	
<b>ADDRESS 3</b>		<b>PRIMARY EMAIL</b>	
<b>TOWN/CITY</b>		<b>SECONDARY EMAIL</b>	
<b>ZIP CODE</b>			
<b>JOB TITLE:</b>			

### MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES/FEES	Please Check
<b>Gold Membership college chapters ONLY</b>	PSB t-shirt	\$80	
<b>Platinum Membership</b>	Professional Headshot   PSB T-shirt   Sisterhood Retreat	\$165	
<b>Diamond DIVA "preferred" Membership</b>	Professional Diva Makeover   PSB Paraphernalia   DIVA Confidence Swag bag   Sisterhood Retreat	\$185	
<b>Membership Dues</b>	Members are responsible monthly dues.	\$25 per month	
<b>PAYMENT METHOD</b>	<input type="checkbox"/> Cash <input type="checkbox"/> Online Payment (PayPal, VISA, MasterCard)		
<p style="color: magenta; font-size: small;">NOTE: Fees are due <b>ONLY</b> if you were selected for membership after the interview process</p>			

## MEMBER INFORMATION

**Are you a Member of another organization? Check all that apply.**

YES  No Name of organization: \_\_\_\_\_

Please indicate if you would be willing to **serve on a chapter committee**:

Yes  Not at this time

Is there a specific committee you would like to serve on? \_\_\_\_\_

\*Fundraiser, Community Services, Special Events, Membership Recruiting

What can you bring to PSB Inc.?

How could becoming a Lady of PSB help you enrich your life?

**Can you provide your own transportation?**

Yes  No

### **Availability**

**Most of PSB events are held on the weekends. Please check all that apply:**

Sunday  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday

Flexible

### **Permission to use photographic images:**

Photographs of PSB members may be used in various PSB communications including but not limited to; newsletters, social media, website etc. Group photographs taken at PSB events may be used without identifying individual members. For individual photographs, please indicate your permission for use:

\_\_\_\_\_ PSB Inc. has my permission to use and identify photographs of me.

\_\_\_\_\_ PSB Inc. does not have permission to use and identify photographs of me.  
How did you hear about us?

**Emergency Contact**

<b>Name:</b>
<b>Address:</b>
<b>Relationship to member:</b>
<b>Contact Number:</b>

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

All information in this application will be treated confidentially. The applicant can email [psbinfo10@gmail.com](mailto:psbinfo10@gmail.com) if they have any questions or need assistance with completing this application. **Please ensure that 2-3 photos are attached to the application.**