



PHILIPPINE INDEPENDENCE DAY COUNCIL, INC.
with the cooperation of the
CONSULATE GENERAL OF THE PHILIPPINES IN NEW YORK

President
NORA GALLEROS

Honorary Adviser
CON. GEN. ELMER G. CATO

R-22-23

Re: 2022-2023 PIDCI Membership Application (NEW)

We are pleased to inform you that PIDCI is accepting new membership, Simply complete (Fill all the blank legibly & accurately as possible) the enclosed **NEW MEMBERSHIP APPLICATION FORM** and mail it, along with an authorized check covering your organization's membership fee (\$35.00) for 2022-2023 to the mailing address shown on the form.

Payment may be made in the form of any authorized check, such as your Association's Check, or personal check of your association's current or immediate past President, or that of your current treasurer. Please note any returned check may invalidate your association's membership (and also disqualify your organization from voting if not made good in time). Also your association (or the issuer of the check) is obligated to reimburse PIDCI for the amount of check plus related bank charges.

If it is that your organization has a new president, we would appreciate your furnishing us with the name of your successor, if any. And if so, please provide us with his or her address and telephone number/s. You may also forward this letter and the accompanying renewal form to his /her attention so it could be completed and sent back to PIDCI.

On behalf of the Philippine Independence Day Council, Inc. (PIDCI). We would like to thank you for your support and we are looking forward to hearing from you as soon as possible.

More power to you and your organization.



MATT DANNY REYES
Chair, Membership Committee 2022



NORA GALLEROS
President



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NEW MEMBERSHIP APPLICATION FORM

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- A. Full Name of the Organization: _____
- B. Name of Current President: _____

Address: _____

Contact Numbers: Home: _____ Work: _____
 Mobile: _____ Fax: _____
 Email: _____

Term of Office of this President (include month and year) _____

- C. Name of three (3) other current officers of the applicant organization, official positions, complete addresses, phone, fax numbers and email address. Please use back page of the form (page 2).
- D. Our organization was and/or has been a member of PIDCI in/since _____.
- E. List projects of the applicant organization. Please use your organization's current letterhead. You may also use newspaper or other publication clippings or other published material).

Enclose

is our check No. _____ covering our new membership application for (35.00 annually).

(CHECKS ONLY), please note that the authorized and acceptable payment must be in the form of the organization checks, or the personal check of its current or immediate past president or the personal check of the current treasurer. This is our proof that the association is officially informed of its membership in PIDCI).

Name of Officer: _____ Title: _____

Signature: _____ Date: _____ The

PIDCI respects the organization's privacy. By signing this new membership form, the organization agrees to have its organization information available to share when PIDCI is requested to. Information will not be used for commercial distribution.

Please make checks payable to Philippine Independence Day Council Inc. or PIDCI. Please mail this form (completed and signed), with all other documents asked for with your payment to:

Chair, Membership Committee
c/o Atty. Manny Quintal
291 Broadway, Suite 1501
New York, NY 10001

NO HAND DELIVERED APPLICATION WILL BE ACCEPTED



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NEW MEMBERSHIP APPLICATION
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Full Name of the Organization: _____

(Excluding the President, Please list the names of three (3) other current officers of the applicant organization, Include complete address, phone, fax numbers and email address:

I. Name of Officer : _____
Address: _____
Contact Numbers: Home: _____ Work: _____
Mobile: _____ Fax : _____
Email : _____

II. Name of Officer: _____
Address: _____
Contact Numbers: Home: _____ Work: _____
Mobile: _____ Fax: _____
Email: _____

III. Name of Officer: _____ Mobile: _____ Fax: _____
Address: _____ Email: _____
Contact Numbers: Home: _____ Work: _____

(For any additional information you may want to provide, e.g. under item E on Page 1, or any other relevant information, you may use the space below).

