

**CREDIT PROFESSIONALS INTERNATIONAL  
PERSONAL DATA FORM  
DIRECT MEMBERSHIP**

Ms./ Mrs./ Mr. First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_ Informal Name: \_\_\_\_\_

Designation/Certification: \_\_\_\_\_ Work Title: \_\_\_\_\_

Home Address:

Work Address:

\_\_\_\_\_  
Street Address or PO Box

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
City, State, and Zip

\_\_\_\_\_  
Street Address or PO Box

(\_\_\_\_\_) \_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
City, State, and Zip

\_\_\_\_\_  
E-mail Address

(\_\_\_\_\_) \_\_\_\_\_  
Work Phone Number

(\_\_\_\_\_) \_\_\_\_\_  
Fax Number

For all mailings please use my: \_\_\_\_\_ home address \_\_\_\_\_ work address

Publication in the directory please use my: \_\_\_\_\_ home address \_\_\_\_\_ work address

Please check the description that best fits the company at which you are employed:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Accounting Firm              | <input type="checkbox"/> Association       | <input type="checkbox"/> Automotive           |
| <input type="checkbox"/> Attorney                     | <input type="checkbox"/> Banking           | <input type="checkbox"/> Collection Agency    |
| <input type="checkbox"/> Commercial Credit            | <input type="checkbox"/> Construction      | <input type="checkbox"/> Credit Bureau        |
| <input type="checkbox"/> Credit Card Company          | <input type="checkbox"/> Credit Counseling | <input type="checkbox"/> Credit Union         |
| <input type="checkbox"/> Educational Institution      | <input type="checkbox"/> Finance Company   | <input type="checkbox"/> Florist              |
| <input type="checkbox"/> Funeral Home                 | <input type="checkbox"/> Government        | <input type="checkbox"/> Insurance            |
| <input type="checkbox"/> Investments                  | <input type="checkbox"/> Manufacturing     | <input type="checkbox"/> Medical              |
| <input type="checkbox"/> Mortgage Company             | <input type="checkbox"/> Petroleum         | <input type="checkbox"/> Professional Speaker |
| <input type="checkbox"/> Publishing/Newspaper         | <input type="checkbox"/> Real Estate       | <input type="checkbox"/> Retired              |
| <input type="checkbox"/> Retail                       | <input type="checkbox"/> Savings & Loan    | <input type="checkbox"/> Telecommunications   |
| <input type="checkbox"/> Title Company                | <input type="checkbox"/> Television/Radio  | <input type="checkbox"/> Utility              |
| <input type="checkbox"/> Other (please specify) _____ |  |   |

How did you find out about CPI? \_\_\_\_\_

What year did you join CPI? \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Birthday (month and day) \_\_\_\_\_

**Please return this form with \$80.00 annual dues to:**

**Credit Professionals International  
10726 Manchester Rd. Ste. 210  
St. Louis, MO 63122  
Phone: 314-821-9393 Fax: 314-821-7171**