



**PFCI**

PROFESSIONAL  
FLORAL  
COMMUNICATORS  
INTERNATIONAL

**Professional Floral Communicators – International**

c/o Society of American Florists

1001 N Fairfax St #201, Alexandria, VA 22314

703-838-5216 | [pfcisafnow.org](mailto:pfcisafnow.org) | [www.safnow.org/pfci](http://www.safnow.org/pfci)

## PFCI MEMBERSHIP APPLICATION

SAF's Professional Floral Communicators – International (PFCI) is a network of professional floral business educators certified by the Society of American Florists (SAF), the national trade association representing all segments of the U.S. floral industry. PFCI members include experts on such topics as principles and elements of floral design, care and handling of flowers and plants, trends, new products, effective business management and technology.

### PFCI Membership Benefits

- Recognition as a professional expert and leader in communication
- The PFCI Membership Directory at [www.safnow.org](http://www.safnow.org) provides exposure to industry and consumer groups looking for speakers
- Opportunities for leadership and skill development through PFCI's educational programs
- Access to a network of professionals and resource materials
- PFCI "Need a Speaker?" advertisements are published monthly in Floral Management magazine
- SAF refers reporters to PFCI members as sources for trends information, providing members with valuable media opportunities

### PFCI Membership Application Review Process

The PFCI Board of Trustees reviews membership applications at its annual spring meeting. If your application were accepted, PFCI would notify you by May so you have time to make arrangements to attend the formal induction ceremony at the Industry Awards Dinner during SAF's Annual Convention in September.

### More Information

Please contact PFCI's staff liaison at SAF Headquarters at (703) 838-5216; [pfcisafnow.org](mailto:pfcisafnow.org). Contact information for the PFCI Board of Trustees is posted at [www.safnow.org/pfci](http://www.safnow.org/pfci).

### Checklist for submitting the PFCI application

- Applicants must be members in good standing of the Society of American Florists and must maintain that membership to use the PFCI designation. Employees of SAF member firms must maintain an Individual SAF Associate membership.
- Application must be received by SAF by January 31, 2019**  
Mail applications to: PFCI c/o Society of American Florists  
1001 N Fairfax St #201, Alexandria, VA 22314  
Email application to: [PFCI@safnow.org](mailto:PFCI@safnow.org)
- Submit an audition presentation.** Email [pfcisafnow.org](mailto:pfcisafnow.org) the direct URL link to your audition presentation. Or submit your audition presentation on seven DVDs or USB Flash Drives.
- Complete and submit the PFCI Audition Presentation Self Evaluation Form.
- Submit a separate document listing your Presentation and Publication Experience.
- Submit a high-resolution (3"x4" at 300 dpi) color headshot. If application were accepted, your headshot would be included in PFCI announcements and during the presentation at the PFCI membership induction ceremony at the SAF Industry Awards Dinner.
- Submit a brief speaker bio. If application were accepted, your speaker bio would be included in PFCI promotional materials. SAF reserves the right to edit bios.
- Please type or print information on the application form. If extra space is required, use additional sheets and identify the correct item number to which the information relates.
- When there is a question on accuracy (for example dates), always qualify "about" or "approximately," but use those terms only when absolutely necessary.
- Tally your points on the application.**
- There is a non-refundable processing fee of \$100. A check (made payable to the Society of American Florists) or credit card number must accompany the application.
- PFCI membership dues are \$75 per year and are billed annually in April.

# PFCI APPLICATION — EVALUATION SHEET

**Applicant's Name:** \_\_\_\_\_

- I. PFCI Application Fee  YES  NO
- II. SAF Membership Status  YES  NO
- III. Headshot & Speaker Bio  YES  NO
- IV. General Information  YES  NO
- V. Professional Experience  YES  NO
- VI. Areas of Expertise  YES  NO
- VII. Statement of Goals  YES  NO
- VIII. Best Programs  YES  NO
- IX. References  YES  NO
- X. Industry Recognition Max. 10 points \_\_\_\_\_
- XI. Leadership in Industry Organizations Max. 10 points \_\_\_\_\_
- XII. Presentation and Publication Experience Max. 40 points \_\_\_\_\_  
Minimum 30 points required for membership consideration;
- XIII. Watch the PFCI Audition Guidelines Video  YES  NO
- XIV. Audition Presentation Max. 55 points \_\_\_\_\_  
Minimum 45 points required for membership consideration;

**TOTAL OVERALL POINTS**  
Minimum 85 points required for membership consideration. \_\_\_\_\_

**The applicant must have the following points to be considered for PFCI membership:**

- 30 points or more for Presentation and Publication Experience
- 45 points or more for the Audition/Demo DVD Presentation
- 85 points or more for Total Overall Points

**As a member of the PFCI Board of Trustees:**

- I recommend this applicant for membership.
- I recommend this applicant resubmit the Presentation and Publication Experience section.
- I recommend this applicant resubmit the Audition/Demo DVD presentation section.
- I cannot recommend this applicant for membership.

Trustee's Name: \_\_\_\_\_ Date: \_\_\_\_\_

# PFCI APPLICATION FORM

## I. PFCI APPLICATION FEE

Attached is a check made payable to SAF for my \$100 PFCI application fee.

Call me for my credit card information.

Charge the \$100 PFCI application fee to my credit card:

MasterCard     Visa     AMEX

CC # \_\_\_\_\_

EXP DATE \_\_\_\_\_ CVC CODE \_\_\_\_\_

NAME ON CARD \_\_\_\_\_ SIGNATURE \_\_\_\_\_

## II. SAF MEMBERSHIP STATUS

My SAF Member ID number is: \_\_\_\_\_

My SAF membership application is attached.

## III. HEADSHOT & SPEAKER BIO

Headshot and speaker bio are attached.

I e-mailed my high-resolution color headshot and speaker bio to [pfcisafnow.org](mailto:pfcisafnow.org).

## IV. GENERAL INFORMATION

Name \_\_\_\_\_

Business Name \_\_\_\_\_

Position \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Business Street Address \_\_\_\_\_

Business City/State/Zip \_\_\_\_\_

Business and/or Personal Website \_\_\_\_\_

Email \_\_\_\_\_

I am:  Educator     Freelance designer     Grower     Retail Florist     Supplier     Wholesaler

I have earned the following professional designations (*Please spell out acronyms*):

AAF     AIFD     Other: \_\_\_\_\_

**V. PROFESSIONAL EXPERIENCE (Mandatory 5-year minimum in the floral industry)**

Industry Employment

Date(s)


Employment other than floral industry

Date(s)


Education/School/Degree/Location

Date(s)


**VI. AREAS OF EXPERTISE**

Please mark your area(s) of expertise.

- |  |  |                                       |
|--|--|---------------------------------------|
| <input type="checkbox"/> Care & Handling | <input type="checkbox"/> Merchandising/Display           | <input type="checkbox"/> Sympathy     |
| <input type="checkbox"/> Color           | <input type="checkbox"/> Money-Making Tips               | <input type="checkbox"/> Technology   |
| <input type="checkbox"/> Financial       | <input type="checkbox"/> Permanent Botanicals            | <input type="checkbox"/> Trends       |
| <input type="checkbox"/> Holidays        | <input type="checkbox"/> Principles & Elements of Design | <input type="checkbox"/> Weddings     |
| <input type="checkbox"/> Marketing       | <input type="checkbox"/> Shop Management                 | <input type="checkbox"/> Other: _____ |

**VII. STATEMENT OF GOALS**

Please use the space below or attach an extra sheet to explain why you hope to achieve the PFCI designation.

**VIII. BEST PROGRAMS**

Please provide information on the presentations you have given to **floral industry groups**.

**Floral Industry** Program Title #1: \_\_\_\_\_

Brief program description

**Floral Industry** Program Title #2: \_\_\_\_\_

Brief program description

**Floral Industry** Program Title #3: \_\_\_\_\_

Brief program description

Please provide information on the presentations you have given to **consumer audiences**.

**Consumer** Program Title #1: \_\_\_\_\_

Brief program description

**Consumer** Program Title #2: \_\_\_\_\_

Brief program description

**Consumer** Program Title #3: \_\_\_\_\_

Brief program description

**IX. REFERENCES**

Please list three industry members **who have heard you give a presentation**, such as sponsors or PFCI members. Please let your references know to expect an email questionnaire from SAF after Valentine’s Day asking them to evaluate your skills as a floral speaker.

**Reference #1**

First and Last Name \_\_\_\_\_  
Email \_\_\_\_\_  
Company \_\_\_\_\_  
Phone \_\_\_\_\_

**Reference #2**

First and Last Name \_\_\_\_\_  
Email \_\_\_\_\_  
Company \_\_\_\_\_  
Phone \_\_\_\_\_

**Reference #3**

First and Last Name \_\_\_\_\_  
Email \_\_\_\_\_  
Company \_\_\_\_\_  
Phone \_\_\_\_\_

**X. INDUSTRY RECOGNITION (Maximum 10 points)**

List Awards, Honors and Designations you have received. (1 point per recognition received)	Organization	Date(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**POINTS FOR INDUSTRY RECOGNITION** (Max. 10 points) \_\_\_\_\_



### XIII. WATCH THE PFCI AUDITION GUIDELINES VIDEO

Watch the PFCI Audition Presentation Guidelines video at [safnow.org/apply-for-pfci](http://safnow.org/apply-for-pfci) (REQUIRED)

List three types of Clear, Articulate Speech points given in the video.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

List two examples of dead air words given in the video.

1. \_\_\_\_\_
2. \_\_\_\_\_

List two examples of ways to engage your audience given in the video.

1. \_\_\_\_\_
2. \_\_\_\_\_

### XIV. AUDITION PRESENTATION

**MINIMUM 45 POINTS REQUIRED FOR MEMBERSHIP CONSIDERATION. Maximum: 55 points.**

- Applicant must **submit an audition presentation.**  
Email [pfci@safnow.org](mailto:pfci@safnow.org) the direct URL link to your audition presentation.  
Or submit your audition presentation on seven DVDs or USB Flash Drives.  
Please label your DVDs and USB Flash Drives with your name.
- Your audition should not exceed 30 minutes. You may edit your presentation to show us your best.
- English presentations are preferred. One or more of the following methods would be used to evaluate applicants who submit a presentation in their native language:
  - Applicant can submit a presentation that includes an interpreter on it.
  - Applicant can arrange to have an interpreter participate in a conference call with the PFCI Board of Trustees during its Spring Meeting, or attend the meeting in Arlington, Virginia. For details, contact SAF's PFCI Headquarters.
  - The PFCI Board will attempt to use a translator app.
  - Auditions with subtitles would still require an interpreter.
- Presentation should feature your individualism.
- You may attach a separate sheet with information about your presentation that you would like the PFCI Board of Trustees to consider. Additional information could include an explanation of your presentation, such as notes about the venue, audience or host.
- Presentation is evaluated based on the criteria listed on the "PFCI Audition Self Evaluation Form."  
See the "Checklist for PFCI Audition" for details on what the PFCI Board of Trustees is looking for when evaluating your audition.
- **If the PFCI Board deems your audition "outstanding," PFCI might use it to show other prospective members as an example to what we're looking.**



# Checklist for the PFCI Audition

**The PFCI Board of Trustees can only evaluate what it sees and hears on your audition presentation. Here is what the PFCI Board of Trustees is looking for when watching your audition:**

## Required Items

- Watch the video PFCI Audition Presentation Guidelines posted at [www.safnow.org/apply-for-pfci-membership](http://www.safnow.org/apply-for-pfci-membership).
- Show us your best. The audition should be your highest quality presentation.
- Your audition should not exceed 30 minutes. You may edit your presentation to show us your best.
- Test each DVD or USB Flash Drive to make sure they play, they are the right presentation, and you can be seen and heard.
- We need to see you as the LEAD PRESENTER, not as co-commentator.
- Make sure the audition shows your Opening. Your Opening should include you introducing yourself, you thanking your host and sponsor, and you giving an overview of the program. Even if someone introduces you, you still need to introduce yourself.
- Use and explain terminology correctly.
- If talking about care and handling, present proper techniques.
- Give proper identification to products. Before beginning a presentation, review the products being used so you can share their proper names with your audience.
- Interact and engage your audience. We want to see a rapport between you and your audience.
- Do not use inappropriate language or make inappropriate innuendos.
- Wear professional attire. (See video for suggestions)
- Be positive. Do not make negative remarks about industry businesses or members.
- Make sure the audition shows your Closing. In Closing, review your program's goals. Relate closing to the opening — tie the bow at the end. And thank your audience, host and sponsor

## Helpful Hints

- Tally your points on the Audition DVD Presentation Evaluation Form. How do you evaluate your audition?
- Audience is not necessary, but is recommended as it helps with your emotional presentation.
- Show excitement and passion for the topic. Smile!
- If you are giving a design demonstration, describe what you are doing as you demonstrate.
- Avoid “dead air” words, such as “um” and “uh.” Pause instead. (See video for suggestions)
- Always repeat audience questions so everyone can hear.
- Avoid turning your back to the audience and camera.
- Don't be trapped behind a table or podium. Come out and interact with your audience.
- Note cards are fine; place them next to designs or on a table or podium for quick reference.
- When using PowerPoint, vocalize and expand on the points listed on the slide, but do not read the slide verbatim.
- Be natural. Avoid sounding too scripted or rehearsed. Avoid memorizing lines.
- Watch your body language. Maintain eye contact with your audience and avoid leaning on tables when sitting.

# PFCI AUDITION PRESENTATION SELF EVALUATION

Applicant must complete and submit this Self Evaluation with their application.

**Tally your points.** How do you evaluate your audition?

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

	Possible Points	Awarded Points
<b>FOLLOWS OUTLINE OF A GOOD SPEECH</b> — Presentation must include:		
<input type="checkbox"/> Opening (REQUIRED)	<b>5</b>	
<input type="checkbox"/> Three major points, which are: 1. _____ 2. _____ 3. _____	<b>5</b>	
<input type="checkbox"/> Closing (REQUIRED)	<b>5</b>	
<b>CLEAR, ARTICULATE SPEECH</b> — Enunciation, modulation, voice control	<b>10</b>	
<b>SHOWS PROFESSIONALISM</b> — Smooth transition between topics, proper attire, accuracy of information, represents sponsor, tasteful language	<b>10</b>	
<b>USE OF PROPER VOCABULARY</b> — Proper definition of terms, variety of verbiage, knowledge of product, proper product identification, limited use of “dead air” words such as “um” and “like”	<b>10</b>	
<b>MAXIMIZES STAGE PRESENCE</b> — Eye contact, body language, audience connection, engaging the audience, topic appropriate for audience, use of microphone	<b>10</b>	
<b>MINIMUM 45 POINTS REQUIRED FOR MEMBERSHIP CONSIDERATION. (Max. 55 points)</b> <b>TOTAL POINTS FOR AUDITION PRESENTATION</b>	<b>55</b>	

**Please provide the following background information about your presentation:**

Presentation Name: \_\_\_\_\_

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

Venue: \_\_\_\_\_

City & State: \_\_\_\_\_

Host: \_\_\_\_\_

Sponsor: \_\_\_\_\_