

**360 N SEPULVEDA BLVD, SUITE #2020, EL SEGUNDO, CA 90245**  
**PHONE: (310) 416-1210 FAX: (310) 416-9055 AND WEB SITE: www.pihra.org**

**MEMBERSHIP APPLICATION**

Are you a: HR Practitioner or Service Provider Member of SHRM? NO YES - Member # \_\_\_\_\_

Name: \_\_\_\_\_ Preferred District #: \_\_\_\_\_

Company: \_\_\_\_\_ Title: \_\_\_\_\_

Company Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Dates employed in current position: (Mo/Yr) \_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ Unemployed/In Transition Retired

Certification: PHR PHR-CA SPHR SPHR-CA GPHR Other: \_\_\_\_\_

Alternate Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Send mail to: Company Alternate Address

**HR Functions Performed**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Administrative         | <input type="checkbox"/> Employee Assistance Programs | <input type="checkbox"/> Payroll                  |
| <input type="checkbox"/> Affirmative Action/EEO | <input type="checkbox"/> Employee Relations           | <input type="checkbox"/> Policies and Procedures  |
| <input type="checkbox"/> Benefits               | <input type="checkbox"/> Employment Law               | <input type="checkbox"/> Professor                |
| <input type="checkbox"/> Career Management      | <input type="checkbox"/> Employment/Recruitment       | <input type="checkbox"/> Research                 |
| <input type="checkbox"/> Communication          | <input type="checkbox"/> Generalist                   | <input type="checkbox"/> Relocation               |
| <input type="checkbox"/> Compensation           | <input type="checkbox"/> HRIS/HRMS                    | <input type="checkbox"/> Safety/Health/Security   |
| <input type="checkbox"/> Compliance             | <input type="checkbox"/> International HR             | <input type="checkbox"/> Student                  |
| <input type="checkbox"/> Consultant             | <input type="checkbox"/> Labor Relations              | <input type="checkbox"/> Training and Development |
| <input type="checkbox"/> Diversity              | <input type="checkbox"/> Organizational Development   | <input type="checkbox"/> Worker's Compensation    |

**Vendor Mailing List**

We occasionally sell our mailing list to HR product and service companies. Please initial here \_\_\_\_\_ if you do not want to receive these mailings.

**PIHRA's Online Membership Directory**

PIHRA's online membership directory is searchable by other members. Please initial here \_\_\_\_\_ if you do not want to be listed in the directory.

**CONVENIENT WAYS TO JOIN!**

Web: www.pihra.org  
Fax: (310) 416-9055  
Mail: PIHRA  
360 N Sepulveda Blvd, Suite #2020  
El Segundo, CA 90245

**HOW DID YOU HEAR ABOUT US?**

- Previous PIHRA Member
- District Meeting
- Seminar/Event/Conference
- Web Site
- Membership Campaign
- Referred by a member \_\_\_\_\_

## DEMOGRAPHIC INFORMATION

<b>Gender</b> <input type="checkbox"/> Female <input type="checkbox"/> Male  <b>Education</b> <input type="checkbox"/> High School <input type="checkbox"/> Some College <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Some College Beyond <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's Degree <input type="checkbox"/> Doctorate  <b>Company Size</b> <input type="checkbox"/> 0-50 <input type="checkbox"/> 50-100 <input type="checkbox"/> 100-499 <input type="checkbox"/> 500-999 <input type="checkbox"/> 1000+	<b>Company Revenue</b> (in millions) <input type="checkbox"/> Less than \$10 <input type="checkbox"/> \$10 - \$25 <input type="checkbox"/> \$25 - \$50 <input type="checkbox"/> \$50 - \$100 <input type="checkbox"/> \$100+  <b>Race/Ethnic Identification</b> <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other  <b>Years in HR</b> <input type="checkbox"/> 0 - 5 <input type="checkbox"/> 5 - 10 <input type="checkbox"/> 10 - 15 <input type="checkbox"/> 15+	<b>Business &amp; Industry Code</b> <input type="checkbox"/> Advertising/Marketing <input type="checkbox"/> Aerospace <input type="checkbox"/> Agriculture/Forestry <input type="checkbox"/> Arts/Entertainment /Recreation <input type="checkbox"/> Biotech/Pharmaceutical <input type="checkbox"/> Communication <input type="checkbox"/> Construction/Engineer <input type="checkbox"/> Consulting <input type="checkbox"/> Consumer Services <input type="checkbox"/> Educational <input type="checkbox"/> Finance <input type="checkbox"/> Government <input type="checkbox"/> Health <input type="checkbox"/> Healthcare <input type="checkbox"/> Hospitality <input type="checkbox"/> Insurance <input type="checkbox"/> Legal <input type="checkbox"/> Manufacturing <input type="checkbox"/> Non-Profit <input type="checkbox"/> Oil & Gas	<input type="checkbox"/> Public Administration <input type="checkbox"/> Publishing/Printing <input type="checkbox"/> Real Estate <input type="checkbox"/> Restaurant/Food Services <input type="checkbox"/> Staffing <input type="checkbox"/> Technology <input type="checkbox"/> Transportation <input type="checkbox"/> Utilities/Energy <input type="checkbox"/> Warehouse <input type="checkbox"/> Wholesale/Retail <input type="checkbox"/> Other _____ _____ _____
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## MEMBERSHIP PAYMENT INFORMATION

### PIHRA MEMBERSHIP DUES SCHEDULE

Dues cover the membership for the calendar year. The membership fee is based on the date of your application for membership:

*If you join between:*

**January 1<sup>st</sup> through June 30<sup>th</sup>**

Full Member \$125.00 (through current year)  
 Non-Resident \$ 95.00 (through current year)

**July 1<sup>st</sup> through September 30<sup>th</sup>**

Full Member \$170.00 (through next year)  
 Non-Resident \$125.00 (through next year)

**October 1<sup>st</sup> through December 31<sup>st</sup>**

Full Member \$147.00 (through next year)  
 Non-Resident \$110.00 (through next year)

Membership Fee Amount \$ \_\_\_\_\_

Non-Refundable Processing Fee \$ **25.00**

**TOTAL** \$ \_\_\_\_\_

Check/Money Order    Visa    MasterCard    Amex

**Professionals in Human Resources Association's  
 Tax ID # 95-2222999 (501C6)**

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

Card#: \_\_\_\_\_ Exp: \_\_\_\_\_

Signature: \_\_\_\_\_

I hereby apply for membership in Professionals In Human Resources Association and agree to abide by the By-Laws and pledge to practice and uphold its Code of Ethics and help carry out the objective of the Association. I understand and agree that I will not use my membership, the directory or services for monetary gain, and that the membership is granted to individuals and cannot be transferred to another person. I understand that dues are on a calendar basis and agree to pay the current applicable membership dues.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_    Amount: \_\_\_\_\_    Check # \_\_\_\_\_    CR# \_\_\_\_\_

Entered by \_\_\_\_\_    Date: \_\_\_\_\_    Batch# \_\_\_\_\_