

MEMBERSHIP APPLICATION

MEMBER INFORMATION

- New Membership
 Membership Renewal
 Ms. Mrs. Mr. Dr. Other _____

First Name _____ Middle Initial _____ Last Name _____

- Certifications:** SHRM-CP SHRM-SCP aPHR PHR
 PHRca SPHR GPHR PHRi SPHRi

Position/Job Title _____

Company Name _____

Preferred Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Work Phone # _____

Fax # _____

Cell # _____

Can We Text You? Yes No

Work Email Address _____

Personal Email Address _____

Preferred PIHRA Location _____

SHRM Member? Yes No If Yes, SHRM ID # _____

How Did You Hear About Us?

- Chapter Meeting SHRM
 Seminar/Program/Conference Social Media
 Current Member Website
 Previous Member Magazine
 Membership Campaign PIHRA Partners (e.g., C3, ThinkHR)


Member Referred By _____

- Occasionally, we send emails offering programs, products and services from HR service providers. By checking this box, you will not receive these mailings.

CONVENIENT WAYS TO JOIN!

 pihra.org (preferred method)

 Fax to (310) 416-9055

 (424) 329-0200

 Professionals In Human Resources Association (PIHRA)
1515 W 19th St, Ste 530
Gardena, CA 90248-4900

MEMBER DUES

- Allow 1-2 weeks for application processing if mailed. Immediate membership available at pihra.org/join
- Allow 4-6 weeks for access to certain services
- Full-time or fully employed students may be eligible for a student membership or discounted rate; visit pihra.org/join-pihra/#dues for more information
- PIHRA membership is non-refundable and non-transferable
- PIHRA members who renew before their expiration date receive a discounted renewal rate of \$125.00

MEMBERSHIP OPTIONS

- Professional Member (\$150) In-Transition Member (\$150)
 General Member (\$150) Retired Member (\$150)
 At Large Member (\$150) Renewing Member (\$125)

In-Transition Membership is held in suspense until verification of unemployment. Renewal discount available only for current members and before expiration date.

METHOD OF PAYMENT

Allow 1-2 weeks for application processing if mailed. Immediate membership is available online at pihra.org/join. Please make check payable to PIHRA.

Check Enclosed (U.S. \$/U.S. Bank Only) \$ _____

Charge My:

VISA Discover MasterCard American Express

I Authorize PIHRA to Charge My Credit Card \$ _____

Credit Card # _____

Expiration Date _____ CVV # _____

Name _____
(As It Appears On Card)

Signature _____

Card Holder Email Address _____

Card Holder Daytime Phone # _____
(Include Country & City/Area Code)

I understand my membership will not start until PIHRA receives and processes my payment.

PIHRA annual membership is not deductible as charitable contribution for federal income tax purposes, but may be deductible as ordinary and necessary business expenses.

I hereby apply for membership in the Professionals In Human Resource Association and agree to pay the current applicable membership fee.

Review our Membership Policy at www.pihra.org/join-pihra/#policy.

Signature _____ Date _____

MEMBERSHIP APPLICATION

DEMOGRAPHIC INFORMATION

Please complete the following. This information assists us in analyzing the demographics of our membership and helps us to design new programming and other initiatives.

Position That Closely Matches Yours:

- | | |
|--|---|
| <input type="checkbox"/> President, CEO, Chairman | <input type="checkbox"/> Coordinator |
| <input type="checkbox"/> CHRO, CHCO | <input type="checkbox"/> Administrative Assistant |
| <input type="checkbox"/> VP or Asst/Assoc VP | <input type="checkbox"/> Legal Counsel |
| <input type="checkbox"/> Director or Asst/Assoc Director | <input type="checkbox"/> Academician |
| <input type="checkbox"/> Manager, Generalist | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Specialist | <input type="checkbox"/> Service Provider |
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Other _____ |

Company Size (# of Employees)

- 0 - 49
 50 - 99
 100 - 499
 500 - 999
 1,000 - 4,999
 5,000 - 9,999
 10,000+

Company Size (Revenue)

- Less than \$10M
 \$11 - \$25M
 \$26 - \$50M
 \$51 - \$99M
 \$100M+

YOUR AREAS OF INTEREST IN HR

Please Select All That Apply:

- | | |
|---|---|
| <input type="checkbox"/> Benefits | <input type="checkbox"/> Inter/Multi-National HRM |
| <input type="checkbox"/> Business Education | <input type="checkbox"/> Labor, Union Relations |
| <input type="checkbox"/> California & Federal Law | <input type="checkbox"/> Measurements, Metrics |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Organizational Dev |
| <input type="checkbox"/> Comp/Awards & Incentives | <input type="checkbox"/> Outsourcing, Offshoring |
| <input type="checkbox"/> Corporate Ethics | <input type="checkbox"/> Performance Mgmt |
| <input type="checkbox"/> Diversity, EEO, Affirmative Action | <input type="checkbox"/> Relocation |
| <input type="checkbox"/> Employee Assistance Programs | <input type="checkbox"/> Small Business Resource |
| <input type="checkbox"/> Employee Relations | <input type="checkbox"/> Staffing, Recruitment, Retention |
| <input type="checkbox"/> Health & Wellness | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Health, Safety, Security | <input type="checkbox"/> Training & Development |
| <input type="checkbox"/> HR Consulting | <input type="checkbox"/> Workforce Law, Compliance |
| <input type="checkbox"/> HRIS, Technology | <input type="checkbox"/> Workplace Planning, Readiness |
| <input type="checkbox"/> Immigration | |
| <input type="checkbox"/> Industry Specific | |

Indicate Primary Reason for Joining PIHRA

- Education Advocacy
 Networking Savings on Partner Products & Services
 Conferences Other _____

BUSINESS & INDUSTRY

- | | |
|---|---|
| <input type="checkbox"/> Advertising/Marketing | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Aerospace | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Agriculture/Forestry | <input type="checkbox"/> Non-Profit |
| <input type="checkbox"/> Arts/Entertainment/Rec | <input type="checkbox"/> Oil & Gas |
| <input type="checkbox"/> Biotech/Pharmaceutical | <input type="checkbox"/> Public Administration |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Publishing/Printing |
| <input type="checkbox"/> Construction/Engineer | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Restaurant/Food Services |
| <input type="checkbox"/> Consumer Services | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Education | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Energy | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Government | <input type="checkbox"/> Warehouse |
| <input type="checkbox"/> Health/Healthcare | <input type="checkbox"/> Wholesale/Retail |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Insurance | |

What Year Did You Start in the HR Profession?

YYYY

Birth Date

MM/DD/YYYY

Your Race/Ethnicity

- | | |
|---|---|
| <input type="checkbox"/> White (Non Hispanic) | <input type="checkbox"/> American Indian/Alaskan Native |
| <input type="checkbox"/> African American/Black | <input type="checkbox"/> Multi-Racial |
| <input type="checkbox"/> Hispanic/Latino (a) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Prefer Not to Disclose |

Gender

- Female
 Male
 Transgender
 Prefer Not to Disclose

MEMBERSHIP TERMS

In the course of your membership, we may have occasion to communicate with you or with others by electronic mail.

Such communications will not be encrypted. Although interception of such communications by a third party would constitute a violation of federal law, we can offer no assurance that such interception will not occur.

We will abide by any instructions you may give us concerning electronic mail communications; in the absence of such instructions, we will use our own judgment regarding the advisability of using such means of communication.