

PINE BELT HUMAN RESOURCES ASSOCIATION

2025 APPLICATION FOR MEMBERSHIP

HTTP://PINEBELTHRA.SHRM.ORG PINEBELTHRASSOCIATION@GMAIL.COM

| Company Name: | | Telephone: | | |
|---|---|--|--|--|
| Mailing Address: | | | | |
| City: | s | State: | Zip: | |
| By joining the Pine Belt Hu to further professionalism a that: | man Resources Association, it nd the knowledge of its memb | <u>is understoor</u> ers. In keepir | d that the primary pur g with that purpose, | pose of this organization is understand and agree |
| provided to me as a me Membership in SHRM a used to son true endors I will assist in the "netw expertise to advance th If invited to make a present members on the topic r | business from any member eit ember of the chapter, i.e., Mem and this chapter may be includ sement by the chapter. orking" of chapter members by e knowledge of all members. sentation to members, it will be ather than as a primary busine resentations may contain infor | bership Direc ed with my pr sharing gene viewed as a ss opportunit | tory. ofessional qualificatio eral knowledge in my n opportunity to educ y. However, materials | ons but cannot be areas of ate and inform provided in |
| Member Informat | ion: | | | |
| | | | | |
| Email: | | | Telephone: | |
| National SHRM Memb | oer? YES NO | National S | HRM ID#: | |
| | Certif | ications: | | |
| SHRM-CP | SHRM-SCP | | PHR | SPHR |



CHAPTER MEMBERSHIP DUES

Membership is based on a calendar year and is not pro-rated.

| MEMBRSHIP TYPE | MEMBERSHIP TYPE | AMOUNT | # of MEMBERS |
|--|-----------------|--------|--------------|
| Local Professional Membership | \$50.00 | | |
| Local Professional Membership (SHRM National Member) | \$40.00 | | |
| Student Membership | \$0.00 | | |

Return your payment and application to:

TOTAL AMOUNT PAID: _____

Make Checks Payable to: Pine Belt Human Resource Association Pine Belt Human Resource Association ATTN: Membership P.O. Box 15666 Hattiesburg, MS 39404

INTERESTED IN VOLUNTEERING?

We would love for you to be involved! Please check the appropriate box(es) below to indicate

your interests:

| Membership | Social Media |
|----------------------|--|
| Public Relations | Speaker / Monthly Meeting Coordination |
| Leadership | Legislative |
| Hospitality & Events | Workforce Readiness |



DID SOMEONE INVITE YOU TO JOIN US?

If so, we would like to thank them!

I was referred by: _____

ADDITIONAL MEMBERSHIPS (if needed):

| Member Information: | | | | |
|-----------------------|------------|---------------|------------|------|
| Name: | | | | |
| Job Title: | | | | |
| Email: | | | Telephone: | |
| National SHRM Member? | YES NO | National | SHRM ID#: | |
| | Ce | rtifications: | | |
| SHRM-CP | SHRM-SCP _ | | PHR | SPHR |
| Member Information: | | | | |
| Name: | | | | |
| Job Title: | | | | |
| Email: | | | Telephone: | |
| National SHRM Member? | YESNO | National | SHRM ID#: | |
| | Ce | rtifications: | | |
| SHRM-CP | SHRM-SCP | | PHR | SPHR |
| | | | | |
| Member Information: | | | | |
| Name: | | | | |



| Job Title: | | | | |
|---|----------|------------|------|--|
| Email: | | Telephone: | | |
| National SHRM Member? YES NO National SHRM ID#: | | | | |
| Certifications: | | | | |
| SHRM-CP | SHRM-SCP | PHR | SPHR | |

