

National Association of African Americans in Human Resources Membership Application 2005

Applicant Information

<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	<i>Please Print Name Clearly:</i>	<input type="checkbox"/> PHR <input type="checkbox"/> SPHR <input type="checkbox"/> CCP <input type="checkbox"/> CBP <input type="checkbox"/> CEEBS <input type="checkbox"/> JD <input type="checkbox"/> PhD <input type="checkbox"/> Other: _____
<input type="checkbox"/> Renewal	<input type="checkbox"/> New Member. I was referred by:	

Membership Category

All NAAHR Memberships are based on the calendar year January 1 – December 31

<input type="checkbox"/> Professional (\$125)	<input type="checkbox"/> Lifetime (\$1,000)	<input type="checkbox"/> Corporate (\$1,000)	<input type="checkbox"/> Corporate Elite (\$5,000)	<input type="checkbox"/> Student ¹ (\$30)
<i>Please indicate the chapter or interest group you want to be affiliated with during the coming year:</i>				
<input type="checkbox"/> No Chapter <input type="checkbox"/> Atlanta <input type="checkbox"/> Baltimore <input type="checkbox"/> Birmingham <input type="checkbox"/> Charlotte <input type="checkbox"/> Chicago	<input type="checkbox"/> Cleveland <input type="checkbox"/> Colorado <input type="checkbox"/> Columbus <input type="checkbox"/> Dallas <input type="checkbox"/> Dayton/Cincinnati <input type="checkbox"/> Detroit	<input type="checkbox"/> Houston <input type="checkbox"/> Indianapolis <input type="checkbox"/> Kansas City <input type="checkbox"/> Los Angeles <input type="checkbox"/> Memphis <input type="checkbox"/> Minneapolis	<input type="checkbox"/> Nashville (Middle TN) <input type="checkbox"/> New Mexico <input type="checkbox"/> New York <input type="checkbox"/> Northern California <input type="checkbox"/> Orlando <input type="checkbox"/> Philadelphia	<input type="checkbox"/> Raleigh (NC Triangle) <input type="checkbox"/> Richmond <input type="checkbox"/> St Louis <input type="checkbox"/> Tampa <input type="checkbox"/> <input type="checkbox"/>

Business Contact Information

Job Title:		
Current Employer:		
Address Line 1:		
Address Line 2:		
City:	State:	Zip:
Phone:	E-mail:	

Home Contact Information

Address:		
City:	State:	Zip:
Phone:	E-mail:	

Member Statements

I prefer NAAHR use my <input type="checkbox"/> business contact information <input type="checkbox"/> home contact information.	
<i>I hereby apply for membership in the National Association of African Americans in Human Resources and agree to pay the current applicable dues. I pledge to assist in carrying out the objectives of NAAHR and to abide by the by-laws of the association.</i>	
Signature of Applicant:	Date:

:: Please Complete Payment Information on Reverse Side of Application ::

¹ A Student Member must be attending a degree-granting college or university on a full-time basis. Regardless of the number of credit-hours taken, no person shall be eligible for NAAHR Student Membership if employed full-time. Documentation of student status must be attached with payment to this application or student status will be denied.

Thank You for Your Membership in NAAHR!

Payment

Please mail this application for membership or renewal with your payment to:

The National Association of African Americans in Human Resources (NAAHR)
PO Box 11467, Washington DC 20008
Federal Tax Identification #: 52-2122803

Check # _____ Money Order # _____ In the amount of \$ _____
 [If your check is returned for any reason, you will be charged a \$35 processing fee, or actual bank fees, whichever is higher]

I authorize \$ _____ to be charged to my Visa Mastercard AmEx

Credit Card#: _____ **Verification Code** : _____ Exp Date: _____ / _____

Print Cardholder Name: _____

Cardholder Signature: _____

Credit Card Billing Address: same as business same as home shown below

IMPORTANT! This info must match the information on your credit card statement or your charges will not be approved. Please print clearly.		For NAAHR Use Only
First Name		Transaction Code:
Last Name		
Phone Number		
Company		Authorization Code:
Address		
City		
State		Problems:
Zip		
Email address for payment confirmation (cc# will not be sent via email)		

- Thanks for joining (or renewing your membership in) NAAHR.
- Your credit card statement may reflect a charge from either NAAHR or InSite Business Solutions.
- Once your membership has been confirmed you will be able to go online to complete a Member Profile, view the Member Directory and access other Member Only resources.

ADMINISTRATION: For NAAHR Use Only			
Action	Date	By	Notes
Date Received at PO			
Payment Method & Amount Confirmed			
Student Eligibility Confirmed			
Date Sent to Membership			
Date Received by Membership			
Email Confirmation to Member			
Data Entry Completed			
Member Materials Shipped			