

2024 SEKHRA Membership Information and Dues Form

$40.00 January – December (full year) $20.00 June – December (1/2 year)

Checks made payable to: “Southeast Kansas Human Resource Association” or “SEKHRA”

Mail to: **Heather Spaur, SEKHRA Treasurer**

**911 East Centennial, Pittsburg, KS 66762**

**Please complete all requested information.**

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| **SEKHRA MEMBERSHIP INFORMATION** | | | | | | | |
| (This area reserved for Treasurer) | Form Rec’d Date: | | Check#: | | | Payment Rec’d Date: | |
| Check or Cash | | Check Date: | | | Payment Deposited: | |
| Chapter Number | | | 0553 | | | | |
| Chapter Name/SHRM Region | | | SEKHRA/Southwest Central | | | | |
| Member First Name | | |  | | | | |
| Member Middle Name | | |  | | | | |
| Member Last Name | | |  | | | | |
| Job Title | | |  | | | | |
| Member Certifications | | |  | | | | |
| Company Name | | |  | | | | |
| SHRM Member ID#, *if applicable* | | |  | Expiration Date | | |  |
| Primary Address 1 | | |  | | | | |
| Primary Address 2 | | |  | | | | |
| Primary City, State Zip | | |  | | | | |
| Primary Fax | | |  | | | | |
| Primary E-Mail Address | | |  | | | | |
| Primary Phone # | | |  | | | | |
| Secondary Address 1 | | |  | | | | |
| Secondary Address 2 | | |  | | | | |
| Secondary City, State Zip | | |  | | | | |
| Secondary E-mail Address, if applicable | | |  | | | | |
| Secondary Phone#, if applicable | | |  | | | | |
| New/Renewal Date | |  | Chapter Member Expiration Date | | | | 12/31/2023 |
| Are you a new member to SEKHRA? | | | (Highlight/Circle one) Yes No | | | | |
| **SOCIETY FOR HUMAN RESOURCE MANAGEMENT (SHRM) MEMBERSHIP** | | | | | | | |
| Are you SHRM Certified? (Highlight/Circle one) | | | | | Yes No | | |
| Are you HRCI Certified? (Highlight/Circle one) | | | | | Yes No | | |
| HRCI Certification Expiration Date*, if applicable* | | | | |  | | |