



DISTRICT 8 – No. 0679

**OFFICERS:**

Tara Denny, President  
Holly Waingrow, President-Elect  
Kristie Hernandez, Treasurer  
Karen Torchia, Secretary

**2019 NEW MEMBERSHIP APPLICATION**

Organization: \_\_\_\_\_

Name & Title: \_\_\_\_\_

PHR                       SPHR                       SHRM-CP                       SHRM-SCP

Address: \_\_\_\_\_

City, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

SHRM Member No: \_\_\_\_\_ Exp: \_\_\_\_\_

In accordance with Bylaws, please report your standing with the Chapter:  HR Professional  Associate

I am interested in volunteering for FLKSHRM Committee. Please contact me.

I was referred by the following current Chapter member: \_\_\_\_\_

**Dues Information**

**\$225 ANNUAL MEMBERSHIP:** I am an individual who belongs to a company, public or private agency, or business entity and therefore I am eligible for Annual Membership for the calendar year 2019.

**\$175 ANNUAL MEMBERSHIP** for additional members employed by the same company.

**\$50 DUES REDUCTION WITH SHRM MEMBERSHIP:** I am a current member of SHRM and I may have \$50 of my Annual FLKSHRM Membership dues applied towards my SHRM membership. (Proof of current SHRM membership must accompany the Membership Application Form to qualify for reduction).

Total Dues Paid: \$ \_\_\_\_\_

As a FLKSHRM member you may have another person employed by the same company represent you, if you are not able to attend a Chapter function/meeting.

If you join during the months of October, November or December and you pay the annual membership fee for the following year you will receive a free membership for those months which will include meals.

If you do not wish to become a member of the Chapter, you may attend meetings as a guest of a current Annual Member. You will be charged a fee of \$25, due upon arrival at each meeting you attend.

**By signing this application, you are also granting permission for FLKSHRM to email you various FLKSHRM chapter communications. With your membership, you are granting FLKSHRM permission to share your email address with other FLKSHRM members. FLKSHRM member email addresses should only be used for FLKSHRM, SHRM, and HR related purposes. Most communications from FLKSHRM will be transmitted via email. FLKSHRM is a professional organization and no solicitation is allowed without board approval.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail your application and your check to: FLKSHRM – 1200 Fourth St. #101 – Key West, FL 33040**

**\*\*Please make check payable to FLKSHRM\*\***