

## 2022 Flathead Valley SHRM Chapter Membership Application



NAME:			
ORGANIZATION NAME:	PHONE:		
JOB TITLE:		MAILING ADDRESS:	
EMAIL:		CITY/STATE/ZIP:	
		SHRM NATIONAL MEMBERSHIP #:	

## MEMBERSHIP PRICING PRIOR TO JANUARY 1, 2022 (RENEW NOW FOR EARLY BIRD DISCOUNTS!!):

Early Bird Regular Membership for SHRM National Members	\$80.00
Early Bird Regular Membership for non-SHRM National Members	\$100.00

## **MEMBERSHIP PRICING AS OF JANUARY 1, 2022:**

Regular Membership for SHRM National Members	\$115.00
Regular Membership for non-SHRM National Members	\$135.00

**<u>FV-SHRM LEADERSHIP VOLUNTEER</u>**: I would be willing to serve as a volunteer leader YES NO

Pay By Check: (Make checks payable to: FV SHRM)
Please do not e-mail, rather, PRINT and MAIL completed form and payment to:
Flathead Valley SHRM, P.O. Box 9932, Kalispell, MT 59904
<b>Pav By Credit Card:</b> (Application still required if paying by credit card. Click <u>here</u> to pay; then sign and click
the submit button below.)
Please pay online @ https://flathead.shrm.org/join-now

I hereby apply for membership in the Flathead Valley Chapter of the Society for Human Resource Management and upon acceptance of my application for membership by the Executive Board, agree to pay the membership dues as described herein.

Applicant or Member S (Electronic Signatures			Date				
FV Chapter SHRM Internal Use							
Membership:	Approved	Denied	Dues received:	<u>Date</u> :	Check #:	<u>CC:</u>	
Regular Membersh	ip	ite Membership	Student Membership	☐Board <u>Check Issuer</u> :			

Vice President of Membership Signature

Date