

Branson Tri-Lakes Human Resources Association

P.O. Box 7144, Branson, MO 65615

2016 Membership Application

Member Name:			
Title or Position:			
Organization Name:			
Mailing Address:Street or PO Bo	ox City	State	Zip
E-Mail Address:			
Business Phone:	Ext:	Fax #:	
SHRM Member: (circle one) SHRM Certification: (circle one) HRCI Certification: (circle one) What future programs would you Association offer to its members	SHRM-CP / PHR / SPHF I like to see Tri-L ?	SHRM SCP R / GPHR .akes Human Re	source
Yearly Dues Monthly Meeting (9 per year) – Members Monthly Meeting (9 per year) – Non-Members Note: First meeting free for guest of a member Half-day Seminar – Members			\$40 \$15 \$20
Half-day Seminar – Men Half-day Seminar – Non Note: "First meeting fre Full Year Membership – seminar and annual holi	-Members ee" does <u>not</u> apply f Includes yearly du		\$50

Please make check payable to: Branson Tri-Lakes Human Resources Association. If you have questions, please contact Katie Sharp, Treasurer, at 417-334-6586 or Katie@tcad.net or btlhra@gmail.com.