



Application for Membership

Name _____

Title _____

Company _____

Street Address _____

City, State, Zip _____

Office Phone _____ Cell Phone _____

Email _____

Administrative Assistant Name _____

Administrative Assistant Phone _____

Administrative Assistant Email _____

Are you the most senior HR executive at your company OR location? Yes No

Number of employees for which you have HR responsibility? _____

Do annual revenues of your local company, division, or branch exceed \$20M? Yes No

May we share your contact info with other Triangle CHRO Association members? Yes No

Do you prefer correspondence be sent: Only to you To you and your assistant

As HR leader, what are some of your top areas of focus?

Signature _____ Date _____

Annual dues are \$2000 for the first year, \$1000 each year thereafter, and will cover the costs of the regular meetings (including speakers when applicable) plus administration and program development.

All members must be approved by the board of directors. Upon approval, you will be invoiced the annual dues and your membership will become effective upon receipt of payment.

Please return to:
Christiaan Heijmen
Triangle CHRO Association
2501 Blue Ridge Road, Suite 400
Raleigh, NC 27607