

## Individual or Agency\*\* Primary Contact

To assist with accuracy, please attach your business card.

Name	Membership ID#
Title	
Agency	
Address	
City	
State	Zip
Email	
Phone	
Fax	

\*f agency, please list any updates to your Covered Staff Members (CSMs) on the attached form.

## Method of Payment

(	Check (	in U.	S. fi	unds	only)	pay	/able	to	<b>IPMA</b>	-HF
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Visa

MasterCard

Account #

Expiration

Name on Card (please print)

Signature of Cardholder

**Mail Preference Service.** IPMA-HR occasionally shares information with recognized organizations that alert members to relevant goods and services. Please check the box if you prefer **NOT** to have your name provided to those other organizations.

## Membership Category

(check one)

U.S. Agency/Associates (see box below)
\$500 International Agency
\$145 Individual
\$105 Online
\$70 Emeritus
\$35 Student (Please provide a copy of your student

## Agency Dues Chart

ID or most recent transcripts)

Number of Covered Staff	Dues
1-3 Staff	\$360
4-6 Staff	\$720
7-10 Staff	\$1,200
11-15 Staff	\$1,800*
16-20 Staff	\$2,400*
21+ Staff	\$2,400* + \$115 each additional person

**New HR Professionals**\*\* \$50 online membership (with fewer than 5 years in the profession)

\*Membership level includes one complimentary IPMA-HR International Training Conference Registration fee (a \$700 value!)

\*\*Must be in addition to an agency membership

# I work in the following industry: (check one)

Federal Government
State Government
County Government
Municipal Government
Special District
University/School
Private Industry
Independently Employed

### Questions? Contact us at membership@ipma-hr.org

#### MEMWEBR09

### **IPMA-HR**

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### Solutions for Public HR Excellence

IPMA-HR is the recognized leader in the delivery of innovative solutions and practical resources for all levels of public sector HR professionals