

2020 Summer aPHR Preparation Course

ATTENDEE REGISTRATION FORM

Virtual Online Class - Zoom Platform

If you are not a CURRENT PIHRA Member, please register as a Nonmember/Guest.

One Form Per Person

	One	Form Per I	Person			
PIHRA Member □	Nonmember Registration □					
FIRST NAME	T NAME					
Professional Designation	□ aPHR □ PHR	☐ PHRca	☐ SPHR	☐ GPHR	□ PHRi	□ SPHRi
	□ SHRM-CP □ S	SHRM-SCP				
Title						
Company/Organization						
	Work Addre	ess □ Ho	me Address I			
Address						
City		State		Zip Code		·
Phone						
Email						
em	Pay by ail: programs@pih	email or fa ira.org // fa		5-9055		
	PAYMENT MUST AC	COMPANY I	REGISTRATI	ON		
Choose your rate type	☐ PIHRA Member	\$349.00	□ Nonmember \$499.00			
	Amount Paid: \$			s a 1-year i	membersi	hip with PIHRA
☐ I am paying by check (ma						
☐ I authorize PIHRA to char	ge my: □ Visa □	Mastercard	□ AMEX	☐ Discove	r	
Card Number		Ехр	iration Date			
Cardholder's Name						
Cardholder's Signature						



Cancellation Policy: Please see attached for Course Enrollment and Cancellation Policy.

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