



## 2019 Fall SHRM-CP and SHRM-SCP Preparation Course

### ATTENDEE REGISTRATION FORM

Program Location: PIHRA's Home Office, 1515 W 190<sup>th</sup> St, Suite #530, Gardena, CA 90248

*If you are not a CURRENT PIHRA Member, please register as a Nonmember/Guest.  
One Form Per Person*

PIHRA Member ☐ Nonmember Registration ☐

PIHRA ID # \_\_\_\_\_

FIRST NAME \_\_\_\_\_

LAST NAME \_\_\_\_\_

Professional Designation ☐ aPHR ☐ PHR ☐ PHRca ☐ SPHR ☐ GPHR ☐ PHRI ☐ SPHRI  
☐ SHRM-CP ☐ SHRM-SCP

Title \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

**Pay by email or fax  
email: [programs@pihra.org](mailto:programs@pihra.org) // fax: 310-416-9055**

**PAYMENT MUST ACCOMPANY REGISTRATION**

Choose your rate type ☐ PIHRA Member \$1,100.00 ☐ Nonmember \$1,250.00

Amount Paid: \$ \_\_\_\_\_

☐ I am paying by check (made payable to PIHRA). ☐ Cash

☐ I authorize PIHRA to charge my: ☐ Visa ☐ Mastercard ☐ AMEX ☐ Discover

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_



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

PIHRA, 1515 W 190<sup>th</sup> St, Suite #530, Gardena, CA 90248, 310-416-1210, [programs@pihra.org](mailto:programs@pihra.org)