



SIG Membership Renewal

Date: _____

AHRD | 1000 Westgate Drive, Suite 252 | St. Paul, MN 55114

Fax: 651.290.2266 | Phone: 651.290.7466

Web: www.ahrd.org

Personal Information

Revised 12/2009

Prefix: _____ Name: _____

Nickname: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Country: _____ Postal Code: _____

Phone: _____ Cell: _____ Fax: _____

Web Address: _____ Preferred Email: _____

Degree/Designation: _____ Gender: Male Female

Work Information (if applicable)

Organization: _____

Position: _____ Department: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Country: _____ Postal Code: _____

Phone: _____ Toll Free: _____ Fax: _____

Preferred Mailing Address: Home Work Remove me from the blast email list

Year started in HRD: _____

How did you hear about AHRD? Website AHRD Member AHRD Publication Other: _____

SIG members may enroll in up to two SIGs, with access to that SIG website and all SIG benefits. SIG members will receive the AHRD e-Digest, but do not have access to the members-only areas of the AHRD website, HRD journals or have voting rights.

AHRD Special Interest Groups (SIGs): Select up to two

- China HRD Research
 Critical HRD & Social Justice Perspectives
 Cultural Diversity
 International
 Leadership
 Qualitative Inquiry
 Scholar Learning & Development
 Scholar-Practitioner
 Theory

Total: _____

Payment *(all fields are required fields)*

1 year of SIG Membership: \$50

VISA
 MasterCard
 Check (payable to AHRD)
 Amount Enclosed: \$ _____

Card number: _____ Exp. Date: _____ 3-Digit Sec Code: _____

Signature: _____

Print name of cardholder: _____

Cardholder Phone: _____

Mail with payment to:

Academy of Human Resource Development

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(For office use only)

initials		fin.
date		
CK/CC		
amt. paid		
bal. due		