

# **CNHRMA**

Central Nebraska Human Resource Management Association  
P.O. Box 932, Grand Island, NE 68802-0932  
www.cnhrma.org  
Serve the professional. Advance the profession.

## **2010 Survey/Membership Renewal**

- A.** Rank order the top 5 issues you would like addressed at CNHRMA's meetings in 2007. Put a "1" in front of the issue you would most like addressed, put a "2" in front of the issue you would next like addressed, and etc.

- \_\_\_\_\_ Injury prevention
  - \_\_\_\_\_ Employee retention
  - \_\_\_\_\_ Developing a Total Rewards Strategy
  - \_\_\_\_\_ Diversity
  - \_\_\_\_\_ The Future of HR
  - \_\_\_\_\_ Leadership
  - \_\_\_\_\_ Legal Issues
  - \_\_\_\_\_ Compensation and Benefits
  - \_\_\_\_\_ Organizational Development
  - \_\_\_\_\_ Performance Management
  - \_\_\_\_\_ Affirmative Action Compliance
  - \_\_\_\_\_ Human Resource Certification
  - \_\_\_\_\_ Other (specify)
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- B.** What speakers do you know, or have heard, that CNHRMA should invite to speak at a meeting? Please note *name, topic, and contact information*.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

- C.** What sites in the Grand Island, Hastings and Kearney areas do you recommend for hosting a CNHRMA meeting? Please note if your company or organization would be willing to host a meeting.

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- D.** Who would you recommend be contacted with information with about CNHRMA? Please note *name, address, phone number, E-mail, and/or company*.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

- E.** Are you interested in sitting for the PHR and/or SPHR exam?    \_\_\_ Yes    \_\_\_ No

## CNHRMA 2010 MEMBERSHIP INFORMATION

The information provided will be listed in CNHRMA's Membership Directory.

NAME	
CERTIFICATION	<input type="checkbox"/> PHR <input type="checkbox"/> SPHR <input type="checkbox"/> NONE
COMPANY	
JOB TITLE	
MAILING ADDRESS	
TELEPHONE	
FAX	
E-MAIL ADDRESS	

**Annual CNHRMA Membership fee for 2010 is FREE for SHRM members until January 31<sup>st</sup>, 2010. As of February 1<sup>st</sup>, fees for SHRM Members are \$20.**

**For Non –SHRM members, the fee is \$35 until January 31<sup>st</sup>, 2009. As of February 1<sup>st</sup>, fees will be \$40.**

Are you a National SHRM Member?       Yes     No

Please indicate your SHRM membership number in the box above (if applicable)

**Please return this completed form and annual membership payment to:**

CNHRMA  
 PO Box 932  
 Grand Island, NE 68802-0932  
[www.cnhrma.org](http://www.cnhrma.org)

For CNHRMA Executive Committee Use Only

Please indicate dues were:

Paid on the following date \_\_\_\_\_ by cash or check (note check#) \_\_\_\_\_

CNHRMA Executive Committee Member Initials: \_\_\_\_\_

For more information or inquiries about CNHRMA, please contact:

Tina Feek • (308) 227-6400 • [tinafeek@yahoo.com](mailto:tinafeek@yahoo.com)