

TEXAS ASSOCIATION FOR HEALTHCARE RECRUITMENT

STATE CHAPTER

MEMBERSHIP APPLICATION - 2017

Check the one that applies:

_____ **Active Membership - \$50** - Active membership status applies to those members who are actively involved in Health Care Recruitment and employed by organizations providing direct health care. **This is the only level of membership with voting privileges.**

_____ **Associate Membership - \$75** – Associate memberships are open to those individuals who are not doing actual recruiting but are interested in furthering the development and growth of TAHCR.

_____ **Institutional Membership - \$100** - Institutional memberships are open to those companies interested in supporting TAHCR and who provide services or products of interest to Recruiters such as advertising agency, temporary or staffing agency, publications, applicant tracking, etc.

PLEASE PRINT!

Your Name: _____

Organization: _____

Mailing Address: _____

City: _____ **Zip Code:** _____

Phone: (____) _____ **Fax:** (____) _____

E-mail Address: _____

Certifications: CHCR PHR SPHR

What areas do you currently recruit for? Nursing Allied Health Other

NAHCR Member? Yes No

Please mail this form with your check (made payable to **TAHCR**) to:

**TAHCR State Chapter
c/o Anne Bunting
7515 Olympia
Houston, TX 77063**

For questions regarding membership, contact Anne at abunting@mdanderson.org