

**PUBLIC RELATIONS SOCIETY OF AMERICA ARKANSAS CHAPTER  
MEMBERSHIP FORM**

After joining the national Public Relations Society of America, the Arkansas Chapter Board of Directors will process your application and begin invoicing you for local dues (\$60/quarter, \$240/annual). Local dues cover the cost of monthly luncheon meetings at the Little Rock Club in the Regions Bank building in downtown Little Rock. Please note that national dues are \$225 per year.

Date \_\_\_\_\_

Mr. Ms. Mrs. Dr. (*Circle one*) Name \_\_\_\_\_  
*First, Middle, Last, Suffix*

**Employer:**

Title \_\_\_\_\_

Organization \_\_\_\_\_

E-mail \_\_\_\_\_

Office Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

**Home:**

E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Do you prefer to be billed  annually or  quarterly? Invoice you at  work or  home?

How did you learn about PRSA? \_\_\_\_\_

Number of years of public relations experience in full-time, paid positions: \_\_\_\_\_ years

Please indicate your primary industry and specialization: \_\_\_\_\_

Accredited Member (APR)    Yes    No    Year Accredited \_\_\_\_\_

Are you interested in serving on one of the following committees?

Membership    Communications/Hospitality    Prism Awards    Programming

**PAYMENT**

**Membership is not transferable. Dues are nonrefundable.**

Make checks payable to Arkansas PRSA. Amount enclosed \_\_\_\_\_

Visa    Mastercard    American Express (*circle one*)

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Amount \_\_\_\_\_

Signature \_\_\_\_\_

Send completed application to Membership Chairman Robin Henson by e-mail to rahenson1@ualr.edu, fax to 501.683.7679, or mail to UALR Office of Communications, 2801 S. University Ave., Little Rock, AR 72204. For questions, call 501.683.7146.