## HALL OF FAME CHAPTER AMERICAN PAYROLL ASSOCIATION LOCAL MEMBERSHIP REGISTRATION September 2013 through August 2014

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CITY:		
HOME or CELL PHONE	#:	Birth Date/
(Information abo	ove is for local chapter	
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CITY:		
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Are you a Certified Payro	oll Professional (CPP)?	YES NO
Do you have a Fundame	ental Payroll Certificate	(FPC)? YES NO
Are you Member of the N	National APA? YES	NO
Nat'l Member #	(HOF Annual dues wa	ived for National APA Members)
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F	Due by September 12 PLEASE MAKE CHECKS PA HALL OF FAME CHAPT	AYABLE TO:
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