

# HR Connect (Formerly Cape Area Personnel Association)

## 2026 Membership Application

Name \_\_\_\_\_ Title \_\_\_\_\_

Company Name \_\_\_\_\_

Company Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Work Phone/Ext. \_\_\_\_\_ Work Fax \_\_\_\_\_

Email Address \_\_\_\_\_

(Meeting notices will be sent via email.)

**Annual Membership Dues \* (January - December 2026)** I wish to join CAPA and have included my membership dues:

\*Reference By-Laws - Article III Membership.

Regular Membership Dues  
 Student Membership  
 Late Enrollment (July 1st or later)

\$50.00
\$15.00
\$25.00

### PREPAID LUNCH OPTION

\*Meals are \$15 each month

Prepaid Meals for 2026 \$120.00

Total reg membership + prepaid meals=\$170.00

### Professional Information

(Please include for confirmation of eligibility.)

HR Responsibilities \_\_\_\_\_  
\_\_\_\_\_

Professional Certifications (such as PHR, SPHR, CPA, CMA, etc.) \_\_\_\_\_  
\_\_\_\_\_

Member of Society of Human Resource Management (SHRM)  Yes  No

Other Affiliations (Business, Professional, Community, etc.) \_\_\_\_\_  
\_\_\_\_\_

I hereby make application for membership into the Cape Area Personnel Association. I pledge to practice and uphold the Code of Ethics of the Association and agree to abide by the By-Laws and to assist in carrying out the objectives of the Association.

Signature

Date

HR Connect 2026 Membership

### Mail Application and Membership Dues:

(Treasurer may be reached at  
573-803-5488)

HR Connect Treasurer  
Attn: Lydia Sumner  
PO Box 5  
Cape Girardeau, MO 63702-0873

[hrconnecttreasurer@gmail.com](mailto:hrconnecttreasurer@gmail.com)

(Make checks payable to CAPA.)

