



HRA-NCA 2018 Survey Order Form

Comprehensive Resources for Successful HR Professionals

ORGANIZATION NAME: _____
CONTACT NAME: _____ **CONTACT EMAIL:** _____
CONTACT TITLE: _____ **CONTACT PHONE:** _____
MAILING ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
 Number of Full-Time employees: _____

I am interested in Sponsorship Opportunities with DC SHRM. Please have someone contact me.

1. 2018 Survey Products - please note that all products are distributed as a soft copy (PDF).

If you would like a hard copy of the Government Contractors Survey Cut or Compensation Survey, see #2.

(Circle the price(s) of the product(s) you are ordering)

	Benefits Survey (PDF)	Compensation Survey (PDF)	Bundle (Benefits & Compensation)*	Online Query	Gov. Contractors Survey Cut (PDF)**	Subtotals
Participant (0-99 Employees)	\$235	\$420	\$580 (save \$75!)	Included in Comp. Survey order	\$315	\$ _____
Participant (100+ Employees)	\$290	\$660	\$900 (save \$50!)	Included in Comp. Survey order	\$450	\$ _____
Non-Participant (0-99 Employees)	\$425	\$755	\$1,045 (save \$135!)	\$2,500	\$500	\$ _____
Non-Participant (100+ Employees)	\$525	\$1,190	\$1,620 (save \$95!)	\$2,500	\$750	\$ _____

2. Additional Survey Products & Options (Benefits Survey not available in Spiral or Binder Hard Copy, check each that apply)

3-ring Binder Hard Copy \$80
 Prior Year's Survey Product _____ (Type) _____ (Year) \$200
 2018 Salary Planning Survey Report \$100 **PLUS \$ _____**

3. Membership Discounts (\$25 discount to members of these organizations, check ONE, if applicable)

DC SHRM WEB WACABA NOVA SHRM Prince George's SHRM PSC
 Mont Co. SHRM AILA- DC Dulles SHRM Howard SHRM Leesburg SHRM **LESS \$ _____**

4. Early-Bird Discounts (Check ONE, if applicable. Applies to survey submissions received by 3/02/2018)

Early-Bird Survey Discount (\$50) Early-Bird Bundle Discount (\$100)*** **LESS \$ _____**

*To obtain the Participant Bundle Price, participation in both surveys is required.

** Government Contractors Survey is a cut of the Compensation Survey with only Government Contractors Data.

*** Bundle Discount requires that both the Compensation and Benefits Surveys were submitted by 3/02/2018.

TOTAL \$ _____

5. Payment Options

CHECK ENCLOSED - make checks payable to: **INVOICE US** - fax order with PO to (202) 745-0275 or scan/email to survey@akroninc.net
 HRA-NCA
 Attn: HRA-NCA Survey Administrator, AKRON Inc.
 P.O. Box 34446
 Washington, DC 20043

CREDIT CARD - fax order form to (202) 745-0275 or scan/email to survey@akroninc.net

Credit Card Number: _____ Exp. Date: _____

Cardholder Name (please print): _____ Signature: _____