



Rhode Island Staffing Association
Application for Membership or Renewal of Membership - 2016

www.ristaffing.org

Please Type or Print Clearly:

Name of Firm (as you would like it to appear in the Membership Directory)

Name of voting representative (Mr./Ms./Mrs.)

Corporate Address

City

State

Zip

()

()

Phone

Fax

E-mail

Web Site Address

Number of Branch Offices: _____ **List additional offices on page 5.**

Does your business own any part of a staffing service operating under another name? yes no

If yes, give name(s): _____

Does your company also engage in the direct hire (permanent) agency business? yes no

Check all that apply: Executive Search Contingency Search Retained Search Direct Hire Temporary Other

Industry Specialties

In which industries does your company specialize? Please check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Import/Export |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Management |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Data Processing | <input type="checkbox"/> Medical (clerical) |
| <input type="checkbox"/> Desktop Publishing | <input type="checkbox"/> Multimedia |
| <input type="checkbox"/> Electronics | <input type="checkbox"/> Office Support |
| <input type="checkbox"/> Environmental | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Graphics | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> Sales |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Technical (Engineering) |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Transportation/Distribution |

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Dues Structure

RISA Membership is based on the calendar year, January 1st to December 31st.

RISA 3-Year Partner Membership	\$225.00
Legislative Contribution	\$ _____
RISA Annual Dues with ASA Membership	\$100.00
RISA Annual Dues without ASA Membership	\$120.00
Legislative Contribution (optional)	\$ _____
TOTAL: \$ _____	

Payment

Method of Payment: _____ Check payable to RISA _____ Credit Card via PayPal (Go to www.ristaffing.com)
 Billing Address _____ Phone _____

Approval Process

Upon completion of the Application for Membership, please send the application along with the appropriate dues to:

RISA
 Mr. Mark Murtagh, CTS
 Corvus Technology Resources
 806 Reservoir Avenue
 Cranston, RI 02910

- E-mail: mark.murtagh@corvustechnology.com

You will be notified by mail upon acceptance by the RISA Board of Directors of your Membership Application.

Company

Signature

Date

Name (Printed)

RISA is an affiliated chapter of ASA (American Staffing Association and NAPS (National Association of Personnel Services) & has membership with The Greater Providence Chamber of Commerce (GPCC).

Help Us Identify What Matters Most to Our Membership

Available time for initial yearly meeting with RISA board member:

Items or topics your organization would like to see RISA address this calendar year:

Legislative issues your organization would like to monitor or hear updates regarding:

Members of your organization who would be interested in discussing volunteer opportunities with RISA:

Referral organizations who may be interested in membership in RISA:

Are you interested in donating to the RISA Political Action Committee?:

What You Need To Know About RISA Membership

Code of Ethics & Good Practices

RISA members agree to abide by the Association's Code of Ethics & Good Practices. Any violation of the Code may result in the loss of RISA membership.

Qualifications for Membership

A firm must be operated on a for-profit basis as a separately identifiable entity that provides temporary help or other staffing services to third parties and does not charge its employees a fee for placing them in jobs. A company must be open for business and actively placing employees on assignment in order to join RISA. Only the headquarters office of a staffing firm may become an active member. Active members are entitled to one vote at all RISA membership meetings. All branch, franchised, and licensed offices of active members will be designated as nonvoting affiliate members. These offices may be eligible to receive RISA publications at no extra charge. Please contact RISA for further information.

No staffing firm shall be eligible for RISA membership unless dues are paid by all staffing firms that have an ownership interest in or are under the common ownership with such firm. Associate membership is available to companies that provide products or services to the staffing industry.

Dues Structure

Membership dues will be a rate set by the Board of Directors annually based on the budget. Association dues shall be set for the calendar year but prorated quarterly for new members. Special assessments for special needs, such as legislative expenses, may be levied upon the members at the direction of the Board of Directors and shall be accompanied by proper explanation. However, special assessment may not be more than 25% of the Association annual dues unless such assessment is approved by membership. Any member may voluntarily contribute more than the amount assessed against him.

Tax Deductions

Contributions or gifts to RISA are not deductible as charitable contributions for tax purposes, but they may be deductible as an ordinary and necessary business expense. Please note that the law requires that the deductible amount of any trade association dues must be reduced to the extent the association incurs expenses during the year for certain specified legislative and political activities. RISA estimates that five percent of annual membership dues are used for such activities and therefore will not be deductible.

Membership Year

RISA membership is based on the calendar year, January 1st to December 31st.

Additional Offices

Company: _____

Company Contact: _____

Address: _____

City, State, Zip: _____

Phone: () - **Fax:** () -

Email: _____

Company: _____

Company Contact: _____

Address: _____

City, State, Zip: _____

Phone: () - **Fax:** () -

Email: _____

Company: _____

Company Contact: _____

Address: _____

City, State, Zip: _____

Phone: () - **Fax:** () -

Email: _____

Company: _____

Company Contact: _____

Address: _____

City, State, Zip: _____

Phone: () - **Fax:** () -

Email: _____