



Chapter # 130 Chapter Name San Diego SHRM

I hereby designate the above named chapter as my primary chapter for SHRM membership coding purposes. I understand that:

1. This in no way precludes membership in other chapters.
2. This allows SHRM to list my membership to this chapter for financial support program purposes only.

Please type or print:

NAME _____ SHRM MEMBER ID# _____
(You must be a current national member of the Society for Human Resource Management to complete this form.)

COMPANY NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE# _____

FAX _____

E-MAIL _____

Date: _____ Member's Signature _____
(Member must sign to validate)

Please fax to:
SHRM Member Relations Department
Fax: (703) 739-0399