



GREATER HENRY SHRM



CHAPTER PRIMARY DESIGNATION FORM

Chapter #: 0622

Chapter Name: Greater Henry SHRM

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

- 1) This chapter designation in no way precludes membership in other chapters.
- 2) This chapter designation 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: _____

Email: _____

Date: _____ **Member's Signature:** _____

(Member must sign to validate)

Please scan and send to shrm.memberrelations.shrm.org and send a copy to henrycountyshrm@gmail.com