

SHRM Primary Chapter Designation

Please take a moment to update your member record

Chapter: **#0162** Chapter Name: **Central NY 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.

NAME _____ MEMBER ID # _____

(You must be a **current national** member of the Society for Human Resource Management to complete this form.)

****Please fill in the address to which you would like your mailings sent****

COMPANY _____

HOME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE# (Bus/Home) _____

FAX _____

E-MAIL _____

DATE ____ MEMBER'S SIGNATURE _____

(Member must sign to validate)

Return to:

Chapter Relations
Fax: (703) 739-0399