



SHRM Primary Chapter Designation

Chapter #: 0058 Chapter Name: Westchester Human Resource Mgt Association

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.)

COMPANY _____

ADDRESS _____

CITY/STATE/ZIP _____

DATE _____ MEMBER'S SIGNATURE _____

(Member must sign to validate)

**RETURN TO:
SHRM
Member/Chapter Relations
1800 Duke Street
Alexandria, VA 22314
Fax: (703) 739-0399**