



## SHRM Primary Chapter Designation Form

Our records indicate that although you are a SHRM member, you may not be affiliated with your local chapter, IndySHRM. There is no charge to designate the chapter and we get financial rewards from SHRM for each member that affiliates.

**Chapter Number:** 99

**Chapter Name:** IndySHRM

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

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.
3. By choosing this chapter designation, this does not confirm or guarantee membership in the chapter.

NAME: [Click here to enter text.](#)

SHRM MEMBER ID#: [Click here to enter text.](#) (You must be a current national member of the Society for Human Resource Management to complete this form.)

COMPANY NAME ADDRESS CITY/STATE/ZIP:  
[Click here to enter text.](#)

EMAIL: [Click here to enter text.](#)

DATE [Click here to enter text.](#)

MEMBER SIGNATURE [Click here to enter text.](#) (Member must sign to validate)

Send Form to SHRM  
[Nicole.Hall@shrm.org](mailto:Nicole.Hall@shrm.org)