



Chapter #: [0234](#)

Chapter Name: [Rogue Valley SHRM](#)

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

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

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 _____

MEMBERS SIGNATURE _____ DATE _____

Who invited you to join our chapter? _____

Please contact Jill Auburn with any questions at 541-956-7895.

Send this form:

Attn: Jill Auburn

Email: aubornj@firemtn.com

Fax: 541-956-7797