

2023 Membership Renewal & Enrollment Form



Local Membership: \$75.00 Annual Dues Local Membership for National SHRM Members: \$50.00 Annual Dues* Local Membership for ISU Student Chapter Members: FREE Annual Dues**

If paying by check, make checks payable to: Cyclone Chapter of SHRM

Mailing Address: Cyclone Chapter SHRM Post Office Box 601 Ames, IA 50010-0601

* Please note for 2023 a dues holiday is unavailable for Cyclone Chapter SHRM membership for National SHRM members. ** Membership to Cyclone Chapter of SHRM is free for students with a paid membership to ISU Student Chapter.

| Name | Title | Title | | | |
|---|----------------|-----------------|-----------------|-----------------------|--|
| Organization | | | | | |
| ndustry # of Employees | | | # in HR Dept | | |
| Primary Address | (| City | State | Zip | |
| Primary E-mail Address | | Primary P | hone | | |
| Secondary Address | (| City | State | Zip | |
| Secondary E-mail Address | | Secondary | Phone | | |
| Are you a National SHRM member? | Yes | No | _ | | |
| If yes, please provide the email linked with your | national SHRI | M membership _ | | | |
| Do you currently hold a SHRM Certification? | Yes | No | _ | | |
| If yes, which one? | CP | SCP | | | |
| Do you currently hold a HRCl Certification? | Yes | No | _ | | |
| If yes, which one? | PHR | SPHR | GPHR | Other | |
| Are you an ISU student chapter member? | Yes | No | _ | | |
| Do you have a correct Cyclone SHRM name tag | ? Yes | No | _ | | |
| Permission to list the above information on the | Chapter Men | nbership Roster | ? Yes | No | |
| All information is required EACH YEAR to rema | ain in good st | anding with Nat | ional SHRM requ | irements of a chapter | |
| | | | | | |
| Signature | | Date | e | | |
| Thank You for Joining t | he Cyclo | ne Chapter | of SHRM for | 2023! | |
| This section for Cyclone Chapter of SHRM Offi | icers only: | | | | |
| Date rec'd Check # | Date Deposited | | Personal/C | Corp | |