



## South Puget Sound Membership Application



### Member Information

I hereby request that the Society for Human Resource Management (SHRM) list my primary chapter as South Puget Sound Chapter #0167. 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.

SHRM Membership Number: \_\_\_\_\_

#### Membership Type:

- SPS SHRM Professional Membership
- SPS SHRM Student Membership

Full Name: \_\_\_\_\_ Certification: \_\_\_\_\_  
*Last First M.I.*

Company Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Street Address Apartment/Unit #/Suite*  
\_\_\_\_\_  
*City State Zip Code*

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Chapter Membership Benefits

Please return this form via email to:

**Virgilio Cintron**  
Membership Director  
SPS SHRM  
membership@spsshrm.org