



## Membership Application

Please provide current information in the spaces provided below and return the form back to us with your applicable membership dues (**\$50/SHRM members, \$65/NON-SHRM members, \$25/Eligible Student Members**) to: **NOLA SHRM, P.O. Box 850878, New Orleans, LA 70185**

Name: Last, First, MI			
Address 1	<input type="checkbox"/> Work Address		
Address 2	<input type="checkbox"/> Home Address		
City, State, Zip			
Membership Level	<input type="checkbox"/> Professional Member (\$50/\$65) <input type="checkbox"/> Eligible Student (\$25)		
Company			
Job Title			
Phone Numbers	Work Direct:	Work Mobile:	Work Fax:
Email Address			
**SHRM National Membership	<b>Member ID #:</b>	<b>Expiration:</b>	
SHRM Chapter Designation	SHRM: Please Designate NOLA SHRM, Chapter 0063 as My Primary Chapter: Initial Here _____		
HRCI	<input type="checkbox"/> PHR <input type="checkbox"/> SPHR <input type="checkbox"/> GPHR		
SHRM	<input type="checkbox"/> SHRM-CP <input type="checkbox"/> SHRM-SCP	<b>SHRM ID# _____</b>	
Other Certifications			
Referred To NOLA SHRM By?			
Credit Card	Type:	VISA    MasterCard    American Express	
	Name on Card:		
	Number:		
	Expiration Date:		Security Code:
Amount to Charge to CC	<input type="checkbox"/> \$50/SHRM <input type="checkbox"/> \$65/NON-SHRM <input type="checkbox"/> \$25/ELIGIBLE STUDENT		
Signature			

**\*\* SHRM National Membership Number:** If you are a SHRM member you must enter your membership number and expiration date to qualify for the discounted NOLA SHRM membership rate. If you would like to become a National SHRM member, you may do so by visiting their web site at <http://www.shrm.org> and selecting "membership".