

P.O. Box 358837 Gainesville, FI 32635

Contact person information	TERMS: DUE ON RECEIPT
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Name: Company Name: Address: City, State, Zip: Phone: Email:

COMMENTS OR SPECIAL INSTRUCTIONS: YOU MUST ENTER YOUR NAME, ADDRESS, PHONE NUMBER AND EMAIL OFADDRESS OF CONTACT PERSON ABOVE.

DATE	DESCRIPTION	MEMBER NAME	SHRM MEMBERSHIP NUMBER	UNITS	UNIT PRICE
	NCF SHRM Membership – National SHRM Member			1	75.00
	NCF SHRM Membership – Local Chapter only		NA	1	100.00
	NCF SHRM Membership Student – National SHRM Member			1	20.00
	NCF SHRM Membership Student – Local Chapter only		NA	1	30.00

SUBTOTAL	
TOTAL DUE	

Make all checks payable to NCF SHRM

If you have any questions, contact Corey Stratton (corey@cyclodex.com) or Mary Norman (mnorman@lakecity-carc.com) Note: If you have not yet created a membership profile on the NCF SHRM website (www.ncfshrm.org), please do so as we cannot approve membership without a profile and payment.

Thank you, NCF-SHRM

Our Mission: To be THE collaborative resource and advocate for the HR profession in North Central Florida.

Our Values: To be Passionate, Excellent, Focused, Innovative, and Involved