

Spring 2023

REGISTRATION FORM FOR SHRM-CP/SHRM-SCP



Complimentary Virtual Study Group

You MUST be a SHRM-LI Member to join this Complimentary Study Group.

Please contact executivedirector@shrmli.org if you would like information on becoming a member.

Name _____		Current Certification(s) _____	
Title _____			
Company _____			
Office Phone _____	Home Phone _____	Cell Phone _____	
E-mail _____		SHRM Member # _____	
Has Exam Date Been Scheduled: Yes _____ No _____ Studying To Test For: SHRM-CP <input type="checkbox"/>			
SHRM-SCP <input type="checkbox"/>			

Do You Have The 2023 SHRM Learning System® ____ Yes ____ No

Please Note: You must have the 2023 SHRM Learning System to participate in the SHRM-LI Study Group

SHRM Learning System® Order Form

(Note: Discounted Participant Kits Available to Study Group Participants Only)

I only want to participate in the SHRM-LI Spring Virtual Study Group _____

Would you like to order a SHRM Learning System® Participant Kit? **(Total Cost: \$640)** Yes _____ No _____

*(Note: Payments Accepted: Check Payable to **SHRM-Long Island Chapter, Inc.** or Credit Card)*

(Check One): Check ☐ Visa ☐ MC ☐ Amex ☐ Credit Card # _____

Exp. Date: _____ CVV _____ Billing Zip Code: _____ House/Building #: _____

Name on Credit Card _____

Signature of Authorized User _____

Address Where System Should Be Mailed _____

E-Mail Form and Payment To: Executivedirector@shmrli.org