EAST BAY ESTATE PLANNING COUNCIL
APPLICATION FOR MEMBERSHIP

Name:_____

Professional/Academic Designations: _____

Company_____

Street, City, Zip_____

Telephone:_____ Fax:_____Email_____

Category:
- ☐ Attorney
- ☐ Certified Public Accountant
- ☐ Certified Trust and Financial Advisor
- ☐ Chartered Life Underwriter
- ☐ Certified Financial Planner
- ☐ Chartered Financial Consultant
- ☐ Member-at-Large - *admitted at the discretion of the Board based upon the applicant's demonstrated qualifications, including, but not limited to, the type and length of employment related to the estate planning process, level of formal education, and activities in the estate planning arena as demonstrated by memberships in other organizations, speaking and/or teaching engagements, published articles, and general stature in the business and/or academic community - Please provide relevant information in this regard on the reverse side of this form.*

I wish to become a member of the East Bay Estate Planning Council and have attended at least one meeting within the last three months: _____ (date of meeting).

I am referred by the following council member(s)_____

The association considers the professional integrity of its members in making membership decisions. Have you ever been subject to discipline by the body responsible for your license or have you been denied a fidelity bond?

____Yes ____No (If yes, please attach an explanation with the application)

I understand that, in accordance with the by-laws members in good standing attend at least three meetings each fiscal year. These membership meetings are typically held the second Monday of each month, September through May (except December), and I will be notified by way of the monthly newsletter.

On the reverse side of this application, I have provided you a description of how I am actively involved in estate planning.

Enclosed is my check, payable to "East Bay Estate Planning Council" for the sum of **$100.00** which includes a one time $25.00 initiation fee and $75.00 dues for the current year (July 1 - June 30). After Jan 1 – $63.00

Date:_____Signature:_____

Please mail application and check to:

East Bay Estate Planning Council
c/o The Association Office
781 McKean Place
Concord, CA 94518-2835

If you have any questions regarding membership, please contact Kathleen Courts at 510.523.5272