Santa Clara County Estate Planning Council New Member Application

Name:		Designations:	
Со	mpany:		
Ad	dress:		
Phone:Mobile P		hone:	(for texting meeting updates)
Email:			
1.	 Profession & Eligibility: Attorney (Section III, Article A1) CPA (Section III, Article A2) Trust Officer/Calif. Licensed Professional Fiduciaries (Section III, Article A3) CLU/ChFC (Section III, Article A4) Other Estate Planning Professional – Members of a Development Office, Investment Advisors, Valuation or Appraisal Professionals, Actuary or Pension Consultants (Section III, Article A5) 		
2.	Signature to certify that I meet or exceed the requirements for membership, as stated in the Articles of Incorporation:		
		[Member Type: 🗆 Regular 🗆 Associate
3. Attach Resume: This will be used to evaluate your application by the Selection Committee.			mittee.
4.	Obtain two signatures from current members: I am a member of the Santa Clara County Estate Pla membership. (a scanned or faxed signature is sufficie		mend the above applicant for
	Print Name	Signature	
	Print Name	Signature	
5.	What do you hope to gain from membership in the SCCEPC?		
6.	Do you have presentation and/or speaker ideas for future meetings?		
7.	Are you interested in leadership opportunities with SCCEPC?		
8.	 Membership Dues: A dues invoice will be sent upon membership approval. Members are expected to attend a minimum of 4 meetings during the fiscal year. Estimated dinner meeting registration is \$65. Regular & Associate Membership - \$110 Premier Membership - \$410 (Includes membership and meetings (\$220 savings). Members must RSVP for each dinner. No further payments will be due. Unused dinners will not be refunded and cannot be transferred.) 		

9. Mail or scan and email this completed form and your resume to:

SCCEPC c/o Non-profit Services PO Box 641461 Omaha, NE 68164