

MEMBERSHIP APPLICATION

Name: _____ **Title:** _____ **Telephone #** _____
Firm _____ **Mobile #** _____
Address: _____
City: _____ **State** _____ **Zip** _____
Email Address: _____

Referring Member: _____

<input type="checkbox"/> I am applying for Regular Membership	<input type="checkbox"/> I am applying for Provisional Membership:	<input type="checkbox"/> I am applying for Associate Membership
A person who has received (1) his or her particular professional designation, (2) has a minimum of two years' experience in estate planning after receiving his or her particular professional designation and (3) is currently actively engaged in the practice of estate planning	A person who has (1) met all other requirements of regular membership, but (2) does not have two years' experience in estate planning after receiving his or her particular professional designation	A person who (1) is a professional associated with the practice of estate planning, but (2) does not meet the criteria of one of the membership categories of discipline.

I have actively engaged in estate planning for _____ years in the following field and am in good standing with my professional association(s):

- I am an Attorney since _____ (mo./yr.) and am in good standing with the Alabama State Bar Association.
- I am a Certified Public Accountant since _____ (mo./yr.)
- I am an Officer of the Trust Department of a bank or Trust Company since _____ (mo./yr.)
- I am a Chartered Life Underwriter and/or Chartered Financial Consultant since _____ (mo./yr.) and in good standing with the National Association of Underwriters.
- I am a Certified Financial Planner since _____ (mo./yr.).

PLEASE NOTE: Each of the Sponsors below **MUST** be a regular member and each sponsor **MUST** be from a **different discipline**.
Disciplines: (1) Trust, (2) Financial Planning and/or Insurance, (3) Accounting, (4) Attorney, (5) AEP (can't sign as other discipline)

APPLICANT'S SIGNATURE	
<i>Signature</i>	<i>Date</i>
Print or Type Name	Print Discipline

DISCIPLINE (1)	
<i>Signature</i>	<i>Date</i>
Print or Type Name	Print Discipline

DISCIPLINE (2)	
<i>Signature</i>	<i>Date</i>
Print or Type Name	Print Discipline

DISCIPLINE (3)	
<i>Signature</i>	<i>Date</i>
Print or Type Name	Print Discipline

Send to: Juanita Sims
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