

ASSOCIATE MEMBERSHIP APPLICATION FOR 2011-2012

TO: **THE NEW ORLEANS ESTATE PLANNING COUNCIL** DATE: _____

1. NAME: _____

FIRM NAME: _____

MAILING ADDRESS: _____

ZIP CODE _____

PHONE: _____ FAX _____ E-Mail _____

2. I graduated from _____ (college) with a _____ degree.

3. I have been actively engaged in various phases of Estate Planning for _____ years.

4. **Please designate which category of Associate membership you are applying for - CIRCLE A, B, C, D or E:**

- A. I am an Attorney and I have been admitted to practice in Louisiana for _____ years.
I (am) (am not) a member of the Louisiana Bar Association and have been a member for _____ years.
- B. I am a CPA and have practiced accounting for _____ years.
I (am) (am not) a member of the Society of Louisiana CPA's, and have been a member for _____ years.
- C. I have been a Life Insurance Professional for _____ years. _____ I am a CLU. _____ I am a ChFC _____ I am a member of National Association of Insurance and Financial Advisors - Greater New Orleans. _____ I am a member of Society of Financial Service Professionals – New Orleans Chapter.
- D. I am an Officer of the _____ Bank (or Trust Company). I have had trust department duties for _____ years as a full time trust officer or bank executive.
- E. I have been a Certified Financial Planner for _____ years. _____ I am a licensed CFP. I am a member of _____ Greater New Orleans Chapter of the Financial Planning Association or _____ the Society of Financial Service Professionals - New Orleans Chapter;
- F. I have been a Planned Giving Officer for _____ years. _____ I am a member of The Greater New Orleans Council of the Partnership for Philanthropic Planning.

5. I am working full time in the office of _____ with _____

I am interested in learning more about estate planning and hope to _____

Signature

Initiation fee of \$100 and \$200 first year's dues will be due upon acceptance

SPONSORED BY:

1. PRINT: _____

SIGN: _____

2. PRINT: _____

SIGN: _____

Mail form only to:

New Orleans Estate Planning Council

P.O. Box 750357

New Orleans, LA 70175

At least one of the two sponsors must be in the same profession as the applicant

Phone: (504) 895-8721 www.noepc.org
Fax: (504) 895-9986 noepc@bellsouth.net
NOEPC - Tax ID #72-0818406

NOTE: *The by-laws state that membership is limited to those persons who have been actively engaged in the area of estate planning within their own profession for a minimum of three years.*