

ESTATE PLANNING COUNCIL OF EASTERN NEW YORK, INC.
Membership Application (half-year: from January on*)

Name: _____

Designations for Member Directory Listing (eg. Esq, CPA, CFP, CTFA, etc.) _____

Business Name: _____

Business Address: _____

Business Phone Number: _____

Email Address: _____ Website: _____

Membership Categoric: Mark any applicable categories, in order (primary, secondary, etc).

- ☐ an officer, manager or administrator of the trust department of a trust company or state or federally-chartered bank; or
- ☐ an individual licensed as a life insurance agent or life insurance broker by the State of New York; or
- ☐ an individual who has attained a Chartered Life Underwriter, Chartered Financial Consultant or Certified Financial Planner designation; or
- ☐ an attorney admitted to practice law in the State of New York; or
- ☐ an accountant licensed as a Certified Public Accountant by the State of New York; or
- ☐ a certified fundraising executive; or
- ☐ an individual who has attained an accreditation in business valuation by a nationally recognized professional organization; or
- ☐ any individual not falling into any of the above seven categories who is seeking qualification for Membership in the discretion of the Board of Directors.

Please provide your primary discipline or designation, any professional degrees, licenses, designations and titles, and any professional associations of which you are a member in good standing:

Signature of Applicant

Date

Estate Planning Council of Eastern New York, Inc PO Box 11136 Loudonville, NY 12211

www.epceasternewyork.org epcenyn@gmail.com 518-458-7774

Please Read Carefully

*** Applications made after January:**

Our Council's fiscal year is July 1 – June 30. Applications received AFTER the January member meeting are priced at a 50% discount. This rate is \$182.50 (\$132.50 membership plus the \$50.00 Application Fee). Annual renewals then begin on July 1.

A check for **\$182.50** made payable to the Estate Planning Council of Eastern New York, Inc. should be submitted with this Application to Stephanie Cogan, Executive Director, Estate Planning Council of Eastern New York, Inc., P.O. Box 11136, Loudonville, New York 12211.

OR pay online HERE.

(<http://www.epceasternewyork.org/members/renewal>)

Please contact Executive Director Stephanie Cogan with any questions at
epceny@gmail.com or 518-458-7774

Thank you!

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