

## MEMBERSHIP APPLICATION

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Telephone # \_\_\_\_\_  
 Firm \_\_\_\_\_ Mobile # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

Referring Member: \_\_\_\_\_

<input type="checkbox"/> I am applying for <b>Regular</b> 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	<input type="checkbox"/> I am applying for <b>Provisional</b> Membership: 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	<input type="checkbox"/> I am applying for <b>Associate</b> Membership 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.
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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)

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

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

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

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

Send to: **Sandy Sudd**  
 Estate Planning Council of Birmingham, Inc.  
 P. O. Box 1691  
 Birmingham AL 35201

Email: [adminstrator@birminghamepc.org](mailto:adminstrator@birminghamepc.org)

If approved, an invoice will be sent to you for the \$400. (\$100 initial processing fee and \$300 membership dues)