

Any estate planning council is eligible to become a member of NAEPC if it encourages as members credentialed professionals in the disciplines of: (i) attorney, (ii) accountant, (iii) insurance/financial planning professional, (iv) philanthropic professional, and/or (v) trust professional. The council may also choose to admit others to membership as it has determined appropriate.

NAEPC dues are invoiced on January 1 and are typically due by mid-March. Dues for new councils that join on or after October 1 will carry through the following calendar year. **There is no per-member fee.**

Councils with < 40 members	\$115	Councils with 401+ members	\$575
Councils with 251 - 400 members	\$525	Councils with 101 - 250 members	\$375
Councils with 41 - 100 members	\$175		

Council Name: _____

Council Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Date of formation: _____ Current Membership #: _____ Fiscal Year end date: _____

Primary Contact: _____ Position Held: _____

Does the council have a website? Yes No if yes, what is the address? www. _____

Are you interested in a website solution hosted by the NAEPC? Yes No

Which disciplines are currently admitted for membership in your organization?

- Attorney Accountant Insurance/Financial Planning Trust Philanthropy

Other(s) (list): _____

Please include the following required documents:

- List of board of directors with full contact info A current copy of the council's bylaws

Email a spreadsheet of members to councilservices@naepc.org using "New Council Roster [council name]" in subject line

- An **Excel** file of your entire member roster with the following **individual fields**: last name, middle initial, first name, professional designations, firm name, address 1, address 2, city, state, zip and email address.

To finalize the application, please return this application with required documents and payment.

Payment by check is welcome. Mail checks to the address at the bottom of the page. Or,

Pay by VISA/MC/AMEX # _____ Exp Date: _____

Signature _____

Date _____

I verify that all of the information I have provided in this application is true and correct.

NATIONAL ASSOCIATION OF ESTATE PLANNERS & COUNCILS