

ESTATE PLANNING COUNCIL OF BERGEN COUNTY, INC.

MEMBERSHIP APPLICATION 2016-2017

INSTRUCTIONS: The following requirements are a condition precedent to being considered for membership:

1. The nominee must devote a significant portion of his/her time and effort to the discipline for which he/she is being nominated.
2. To be eligible, two members must sponsor the nominee, neither of whom can be from the same firm as the nominee.
3. The completed application must be mailed/faxed/e-mailed to the current Chairperson of the Membership Committee or directed to him/her through a current officer of the Council.

(Please type or print)

Nomination for _____, DISCIPLINE. See #5,6,7,8,9,& 10 for category listings.)

1) _____
Name of Nominee Preferred Nickname

Home Address _____

Home Telephone # _____ Home Fax # _____

Home E-Mail _____

Firm Name _____

Address _____

Business Telephone # _____ Business Fax # _____

Business E-Mail _____

Correspondence from the Council should be sent to the nominee's __ Home __ Office

2) Has the nominee ever been a member of an Estate Planning Council ___ Yes ___ No

Council(s):

Dates

3) EDUCATION:

School

Degree

School

Degree

School

Degree

School

Degree

4) EMPLOYMENT HISTORY: Please provide previous 10 years, listing last job first.

From

To

Employer

Duties

From

To

Employer

Duties

From

To

Employer

Duties

From

To

Employer

Duties

PLEASE COMPLETE ALL RELEVANT INFORMATION (Items 5,6,7,8, or 9 & 10)

5) ACCOUNTANTS:

(a) Admitted as a CPA in _____, _____
(State & Year) (State & Year)

_____, _____
(State & Year) (State & Year)

(b) Member in good standing of the NJ State Society? _____ Yes _____ No

(c) Member in good standing of the AICPA? _____ Yes _____ No

6) ATTORNEYS:

(a) Admitted to practice law in _____, _____
(State & Year) (State & Year)

_____, _____
(State & Year) (State & Year)

(b) Member of good standing of _____ Bar(s)

(c) Member of _____ Bar Associations

7) LIFE UNDERWRITERS:

(a) Received Chartered Life Underwriter Designation in _____
(Year)

(b) Received other professional designations: _____
Designation Year

Designation Year

(c) Member in good standing of _____ Life
Underwriting Association

and _____ Chapter of CLU/ChFC

8) BANKING AND TRUST OFFICERS:

(a) Nominee's present title is _____

at _____
(Institution)

(b) Function at Institution : _____

(c) Professional Designations : _____

9) AT-LARGE MEMBERS:

(a) Professional Designations: _____

(b) Professional Affiliations/Honors: _____

10) FINANCIAL PLANNERS:

(a) Professional Designations: _____

(b) Received Professional Designations: _____

Designation Year

Designation Year

11) SUPPLEMENTAL INFORMATION: (To be completed by all applicants)

(a) Additional Qualifications: (Please describe your estate planning or estate administration activities and experience – if not noted above – and any specialized training or education.)

(b) Personal Statement: (Please describe what you feel you can contribute to the Estate Planning Council should you become a member.)

12) ADDITIONAL COMMENTS:

The nominee has attended two meetings as a guest to meet with members of the Board and Council members. The nominee also understands that the annual dues (\$385 for 2016-2017) will become payable upon acceptance of the application and that all members are expected to attend meetings and remain a member in good standing.

Meetings attended as a guest (dates): _____ and _____

Signature of Applicant

Date

13) SPONSORS' CERTIFICATION: We certify that the nominee is engaged in the Practice of estate planning in his/her discipline.

Sponsor: _____ Signature/Date: _____
PRINT NAME

Co-Sponsor: _____ Signature/Date: _____
PRINT NAME

14) RECEIPT: The above completed Membership Application has been received by the Estate Planning Council of Bergen County on: _____.

By: _____, Membership Chairperson

PLEASE RETURN COMPLETED APPLICATION TO:
Estate Planning Council of Bergen County, Membership Chair

Matthew Jack, CFP®, CRPSSM

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