

Quad City Estate Planning Council 2022-2023

APPLICATION FOR ACTIVE MEMBERSHIP

Date: _____

Application for Membership in the Quad City Estate Planning Council is hereby made by:

Name: _____ Title: _____

Firm/Organization: _____ Tel. #: _____

Business Address: _____ Cell #: _____

City, State, Zip: _____ Fax #: _____

E-mail: _____ Website: _____

Discipline: Attorney ____ CPA ____ CLU ____ Trust Officer ____

Special: ____ ChFC ____ CFP ____ AEP; Other: _____

If other, please explain: _____

Years in Discipline: _____ %Time Estate Planning currently: _____

Reasons for wanting to be a member of the Council: (Include items of relevant interest, such as professional background, professional organizations, lectures, publications, etc.)

Name two Current Quad City Estate Planning Council Members as Sponsors:

Sponsor #1 _____ Signature _____

Sponsor #2 _____ Signature _____

Applicant Signature _____

Return completed application to:

Quad City Estate Planning Council

PO Box 4732

Davenport, IA 52808

-or scan & email to: QCestatePlanningCouncil@gmail.com

Questions? Contact us via email: QCestatePlanningCouncil@gmail.com

For general information visit: <http://www.qcestateplan.org/>

**Membership Dues for 2022-2023 Membership Year (Sept. 2022 thru Aug. 2023) are \$200,
or pro-rated to \$140 if application is received after Dec. 31, 2022**

FOR OFFICE USE

Actions on Application:

Received (by cd): _____ Distributed to Board (at monthly Board Meeting): _____ Distributed to current Membership: _____

Approved (10 days post dist to mbrshp): _____ New Member Notified on Action: _____ Invoiced for Current Dues _____