



Membership Application

CONTACT INFORMATION

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Website: _____

Referred by: _____

DISCIPLINE (please only check one)

- | | |
|--|---|
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Investments |
| <input type="checkbox"/> Accounting/Tax Advice | <input type="checkbox"/> Life Insurance |
| <input type="checkbox"/> Education | <input type="checkbox"/> Financial Planning |
| <input type="checkbox"/> Charitable Planned Giving | <input type="checkbox"/> Valuation/Appraisal |
| <input type="checkbox"/> Banking/Trust & Estate Administration | <input type="checkbox"/> Other (Describe) _____ |

Signature: _____ Date: _____

PAYMENT INFORMATION

Dues payment of \$105 must be received for membership approval. Check and credit cards accepted. Checks should be made payable to **Philadelphia Estate Planning Council**.

Credit Card Payment Information:

Credit Card Number: _____

Type of Card (circle one): Visa Amex MC Expiration Date: _____

Name on Card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Signed: _____ Date: _____

Return completed application and payment to:

Denise Downing
PEPC
P.O. Box 579
Moorestown, NJ 08057

Phone: 856-234-0330
Fax: 856-727-9504
Email: denise.downing@comcast.net

By submitting my \$105 dues payment, I am certifying to the PEPC that no professional accreditation agency or organization with jurisdiction over the conduct of members of the discipline for which I am registered with the PEPC has revoked such accreditation.