

Membership Application

PLEASE TYPE/PRINT:

Name	Position Date of Affiliation/Employment City/State/Zip	
Organization		
Address		
Email	Telephone	
Recognized Credentials:		
\square ASA - Associate of the Society of Actuaries	CPWA - Certified Private Wealth Advisor	
CFP - Certified Financial Planner	CTFA - Certified Trust and Financial Advisor	
ChFC - Chartered Financial Consultant	CVA - Certified Valuation Analyst	
CLU - Certified Life Underwriter	J.D Juris Doctor	
CPA - Certified Public Accountant		
Month/Year Recognized Credential Received?		
Is Your Recognized Credential Current?		
Percentage of Time Spent in Estate Planning		
List names of Professional Associations to which you curren (i.e. Bar Association, Association of Insurance and Financial		
1.		
1 2	4	
	4 5	
2	4 5	
2 3	4. 5. 6.	
2. 3. Employers during the past ten (10) Years:	4. 5. 6. Position & Nature of Work	
2 3 Employers during the past ten (10) Years: <u>Dates</u> <u>Name & Addre</u>	4. 5. 6. Position & Nature of Work	

Please read the membership Bylaws below. After reviewing the requirements, please put a checkmark next to the Member Class you are requesting admission and place a checkmark next to each of the criteria required for entry into that Member Class certifying that you meet the requirement.

Please select one Member Class only.

Chicago Estate Planning Council ("Council") Bylaws Article III: Members

Section 1. Class of Members. The Council shall have the following membership classifications:

<u>Regular</u>. Any person who:

□ Is currently engaged in estate planning (defined below) as a professional in the fields of law, accounting, insurance, financial planning, wealth management, trust and estate administration, planned giving, or valuation services;

Has engaged in estate planning as a professional for a minimum of **five years**;

Has demonstrated a significant commitment to estate planning either by **<u>[one of the following two</u> <u>must be checked]</u>:**

Acquiring a recognized credential of his or her profession that enhances his or her ability to provide estate planning services [Recognized credentials shall include JD, CPA, CFP, CPWA, CLU, ChFC, ASA, CVA, CTFA and other such credentials as the Board shall from time to time approve]

OR

By making an equivalent contribution to the profession or to his or her professional development and qualifications [Please provide detail of equivalent contribution]

For purposes of this article, "estate planning" is the process of arranging, accumulating, and preserving a person's property so as to gain maximum benefit of the applicable laws relating to the ownership and transfer of property while carrying out the person's own wishes for the disposition of his or her property during life and upon death.

Associate. Any person who:

□ Has a minimum of <u>two years'</u> experience in estate planning [years of experience are measured from the date the applicant meets the general qualifications, and not necessarily from the date a professional designation is received.]

and

Otherwise meets the criteria of regular membership.

Has demonstrated a significant commitment to estate planning either by [one of the following two must be checked]:

Acquiring a recognized credential of his or her profession that enhances his or her ability to provide estate planning services [Recognized credentials shall include JD, CPA, CFP, CPWA, CLU, ChFC, ASA, CVA, CTFA and other such credentials as the Board shall from time to time approve]

By making an equivalent contribution to the profession or to his or her professional development and qualifications. [Please provide detail of equivalent contribution]

If applying for Associate Membership, please provide the month and year for when you will have been engaged in estate planning for 5 years_____

NOTE: Associate Members do not have voting rights.

The Council promotes and encourages diversity in the estate planning profession at all levels.

Optional Questions:		
Race and Ethnicity:		
Do you have a visible or non-visible disability?	Yes	No
Do you identify a LGBTQIA+ Yes	No	
Is there anything else no covered by the above questi	ons that you wou	ld like for us to know about you
background as it relates to diversity?		

The CEPC By-laws provide, in part, that "The purposes for which the Council is organized are: 1) To maintain the highest standards of service in providing informed guidance in the creation, conservation, and distribution of estates and trusts; 2) To continue and further the education of its members and the public in estate planning matters; 3) To increase public understanding of the need for competent estate planning; 4) To promote cooperation, and to foster a better understanding of the proper relationship among estate planning specialists from different fields and to bring together in one association those specialists who have a common interest in promoting the Council's purposes; 5) To encourage the highest standards of ethical conduct."

The undersigned hereby applies for membership in the Chicago Estate Planning Council and submits the above information in support of this application. I affirm that I have read and understand the purposes of the Council and that I will not use my membership in any form of advertisement or for solicitation of business. I certify to the Council that I am familiar with and will take an active interest in furthering the purposes of the Council.

Signature

Date

Please return Application to Chicago Estate Planning Council

info@cepcweb.org

SPONSOR FORM MUST BE ATTACHED TO MEMBERSHIP APPLICATION WHEN SUBMITTED TO THE COUNCIL

Upon receipt of this application and accompanying sponsor form, it will be reviewed by the Council's membership chair. Incomplete applications will be returned to applicant.

The applicant will then be interviewed by a member of the Board, who will report to the directors. An applicant for regular or associate membership who meets the criteria shall become a member if so elected by two-thirds vote of the Board present and voting at a meeting in which the application is considered.

OR