

**GREATER BOCA RATON ESTATE PLANNING COUNCIL  
NEW MEMBERSHIP FORM**

1.	Applicant's Name	
	Name of Firm or Institution	
	Address	
	Business Telephone	Business Fax
	E-Mail	Web Site
2.	<p>I am:</p> <p>A. <input type="checkbox"/> An officer of a corporation authorized to exercise trust powers in the State of Florida.</p> <p>B. <input type="checkbox"/> A member of the Bar of the State of Florida. Florida Bar No. _____</p> <p>C. <input type="checkbox"/> A Certified Public Accountant licensed to practice in the State of Florida, an enrolled IRS agent, or a full-time employee of the IRS (please circle which apply). License No. _____</p> <p>D. <input type="checkbox"/> A Certified Financial Planner, Chartered Life Underwriter, Chartered Financial Consultant, Chartered Financial Analyst, Chartered Market Technician, Certified Trust and Financial Advisor, Certified Investment Management Analyst, Chartered Alternative Investment Analyst or Retirement Income Certified Professional (please circle which apply). Certificate No. _____</p> <p>E. <input type="checkbox"/> A Certified Fund Raising Executive or full-time planned giving professional employed by or consulting with Section 501(c)(3) organization(s). Certificate No. _____</p> <p>F. <input type="checkbox"/> An individual who previously held membership in the Greater Boca Raton Estate Planning Council and is retired or not presently working. Dates of prior membership _____</p>	
3.	I have been actively engaged in estate or financial planning (as indicated above) for the preceding _____ years (at least three years are required) and practicing such profession in Florida for _____ years (at least one year is required).	
4.	To the best of my knowledge and belief the information contained herein is true and correct. I agree to abide by the decision of the Board of Directors as to the disposition of this application.	
	Date	Signature
5.	Recommendations of two current members are required. One of the members must be of the same membership category as the applicant and at least one of the members must be from a firm or institution other than that of the applicant.	
	Signature and Printed Name of First Sponsor:	
	Signature and Printed Name of Second Sponsor:	

Make your check for \$450 payable to: **GREATER BOCA RATON ESTATE PLANNING COUNCIL** and mail *with application* to:  
**GBREPC**  
c/o Beverley Todd  
8927 Hypoluxo Rd, Ste A-4, PMB 152  
Lake Worth, FL 33467  
Applications received *without* payment will *not* be processed.