

ESTATE PLANNING COUNCIL OF THE FUN COAST, FLORIDA
2019 RENEWAL MEMBER APPLICATION

Please complete the application and send it, with your check for \$200.00 to:
EPCFC Treasurer Johnny Svajko, PO Box 354488 · Palm Coast, FL 32135-4488

Your Name: _____

Degrees and/or Designations: _____

Business Name: _____

Office Address: _____

Home Address: _____

Telephones: Business _____ FAX _____ Cell _____

Preferred Email Address: _____

Business Website Link: _____

Appropriate Membership Category for which you are applying – Please choose only one:

_____ Attorney

_____ Chartered Life Underwriter, Certified Financial Planner, or Chartered Financial Consultant

_____ Certified Public Accountant or Accountant

_____ Bank Trust Officers or Bank Officers involved in Estate Planning

_____ Associate - individuals professionally involved in Estate Planning but not holding the credentials listed above. Includes insurance agents, securities representatives, investment advisors, financial planners, paralegals and other interested persons.

_____ Representative of charitable organizations or foundations who use estate planning as a means of funding their activities.

_____ Affiliate – Individuals in other professions or occupations who support the goals, objectives, and methods of the Estate Planning Council of the Fun Coast.

I am a member in good standing of the (Please name your professional association):

Notes:

- 1) The information requested will be used to keep our web site and contact information current. Please check epcfuncoast.org for accuracy.
- 2) The EPCFC Board has adopted procedures which, in rare circumstances, could allow the review of a member's status, and which could lead to revocation or non-renewal of Membership. Accordingly, EPCFC relies on having up-to-date information in your Application. Thank you.

Date: _____ Your signature: _____