



THE TAMPA BAY ESTATE PLANNING COUNCIL

2013-2014 Membership Application

Contact Information (please print)

Name _____

Firm _____

Address _____

City _____ ZIP _____

Phone _____ Fax _____

Email _____

Do not publish Fax Do not publish email

Have you ever been a member of this Council? Yes No If yes, last year of your membership _____

Membership Discipline (please select one)

- | | |
|---|--|
| <input type="checkbox"/> Attorney & member of the Florida Bar
Year admitted to Florida Bar _____ | <input type="checkbox"/> Insurance professional as |
| <input type="checkbox"/> Certified Public Accountant (CPA) | <input type="checkbox"/> Chartered Life Underwriter (CLU) |
| <input type="checkbox"/> Trust Officer of a Registered Regulated Trust Dept. | <input type="checkbox"/> Chartered Financial Consultant (ChFC) |
| <input type="checkbox"/> CFP® professional Year certified _____ | <input type="checkbox"/> MDRT Qualifying or Life Member |

Signature: _____

Required Recommendations

- One TBEPC member from the same member discipline, and
- One TBEPC member from a different member discipline, and
- A letter of recommendation from any TBEPC member.

Recommended by

Member signature _____

Print Name _____

Discipline _____

Member signature _____

Print Name _____

Discipline _____

Send completed form, letter of recommendation and check for \$250 made payable to Tampa Bay Estate Planning Council

**Tampa Bay Estate Planning Council
12157 W Linebaugh Ave PMB 312
Tampa, FL 33626-1732**