

**EUGENE ESTATE PLANNING
COUNCIL APPLICATION FOR MEMBERSHIP - 2024-25**

EUGENE, OREGON

Regular Dues:	\$250 with Early Bird Discount if received by 10/31/24	\$275 if received after 10/31/24
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Please complete this form and email it to: eugeneestateplanningcouncil@gmail.com to the attention of Amber Suklje, Membership Chair

1. Individual Name: _____

Firm Name: _____

Business Address: _____

Telephone: _____ Fax: _____ E-mail Address: _____

2. I have been a resident of _____ for _____ years.
City, State

3. I have been actively engaged in estate planning, estate administration, or teaching about them for _____ years.

4. I have been employed as a trust officer, planned giving officer, or teacher for the past _____ years.

-or-

I have been licensed by or a member in good standing of (please designate one):

A) The Oregon State Bar for the past _____ years.

B) The Oregon State Board of Accountancy for the past _____ years.

C) The American Society of Chartered Life Underwriters for the past _____ years.

D) Certified Financial Planner for the past _____ years.

5. Please provide any additional information which supports your qualifications for membership in the Council:

Date:

Signature:

EEPC Member Endorsements (one must be from your same profession):

Name:

Signature:

Name:

Signature: