



**SOUTH PLACER ESTATE PLANNING COUNCIL ("SPEPC")**

*Mission, Vision, and Purpose: To provide a forum for estate planning professionals to meet and learn from one another in a generous and supportive environment, and to be a valuable community resource so that every person who needs help in any phase of estate planning or administration will find a competent and compassionate professional who can give them the help they need.*

**APPLICATION AND CONTRACT OF MEMBERSHIP**

Name: \_\_\_\_\_

Name of Business/Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

Professional licenses (including number) (this information will not be listed in the directory):

\_\_\_\_\_

\_\_\_\_\_

Certification(s): \_\_\_\_\_

Specialty(ies): \_\_\_\_\_

Your membership dues include listing in the directory in one of the following general professional categories. Listing in a particular category does not mean a member carries any specific license or certification. **Additional categories are \$20.00 each (please check all that apply):**

- |  |   |
|--|---|
| <input type="checkbox"/> Accounting & Tax      | <input type="checkbox"/> Legal                  |
| <input type="checkbox"/> Fiduciary Services    | <input type="checkbox"/> Real Estate            |
| <input type="checkbox"/> Financial Advisor     | <input type="checkbox"/> Insurance              |
| <input type="checkbox"/> Charitable Non-Profit | <input type="checkbox"/> Other (specify): _____ |

Category for Name Badge (e.g., CPA; Attorney; Financial Advisor): \_\_\_\_\_

How did you hear about the SPEPC? \_\_\_\_\_

Do you have three (3) years in the estate planning field? Please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



The benefits of membership in the SPEPC are the following:

- (a) listing on the SPEPC’s website;
- (b) reduced registration fees to our dinner meetings and events, which often include continuing education credit;
- (c) access to the members’ only section of the SPEPC website;
- (d) networking opportunities with other professionals;
- (e) access to member’s only event; and
- (f) the opportunity to serve as a committee member, director, and/or officer of the SPEPC corporation.

A membership will terminate, with no refund for any portion of a paid membership fee, upon the occurrence of any of the following events: (a) resignation of the member in writing; (b) the death of the member; or, (c) upon the determination of the Board of Directors, in its sole discretion, that the member has (i) failed to maintain eligibility for membership, (ii) failed to adhere to any provision of the Bylaws or the SPEPC’s Operating Rules, or (iii) committed any act or omission that is illegal, not in furtherance of the purpose and objectives of the SPEPC, or has caused or may cause harm to the SPEPC’s reputation. Termination will be valid and effective only if the member has been given written notice of the grounds for termination, the Board of Directors has provided an opportunity for the member to come before the Board and be heard during the thirty (30) calendar day period following the notice, and the member has either come before the Board or declined to do so during this period. The decision of the Board of Directors will be final.

*My signature below indicates that I agree to the provisions above, and acknowledge I will read the SPEPC’s Bylaws, and agree to abide by their provisions.*

Dated: \_\_\_\_\_

\_\_\_\_\_  
[Signature of Applicant]

**Please submit your application one of two ways:**

1. **BY MAIL: Mail application with check in the appropriate amount payable to “SPEPC” at:**  
SPEPC Membership, 1911 Douglas Blvd. Ste. 85-369 Roseville, CA 95661
2. **E-mail application to [membership@southplacerepc.org](mailto:membership@southplacerepc.org) An invoice will be e-mailed for electronic payment.**

[For SPEPC use only]

\$ \_\_\_\_\_ Received from applicant for annual dues. Check # \_\_\_\_\_ PayPal \_\_\_\_\_  
 \_\_\_\_\_ License status verified (date and initial).  
 \_\_\_\_\_ Application approved by Vice President Membership (date and initial).  
 \_\_\_\_\_ Application approved by Board of Directors (President date and initial).  
 \_\_\_\_\_ Added to membership list and web site (date and initial).  
 \_\_\_\_\_ Added to membership e-mail distribution list  
 \_\_\_\_\_ Ordered name tag