## Tim Bower, CAE Executive Director

## www.EFPCSNJ.org

PO Box 460 Collingswood, NJ 08108

## Estate & Financial Planning Council of Southern New Jersey



Phone: 856-795-0551 Fax: 856-210-1619

Member of the National Association of Estate Planners and Councils

EFPCSNJ@bowermanagementservices.com

## Membership Application

Name:				
Title:				
Company:				
Address:				
Phone:				
Email:				
I am actively engaged in the estate and/or financial planning profession in				county
for years.				
I hold a license or designation	certification and am a	member in good stand	ling in the following:	
Attorney	CPA	CFP	ChFC	CLU
CTFA or qualified p				
Or I have a		certification	designation.	
My area of discipline(s): Accountant _				
Reverse Mortgage Consultant			Trust Officer	
Or: I have been involved in thi	s industry as:			
Or I would like to apply to be				
categories:Student (\$2	25 annually) For students atten	ding undergraduate or gradu	ate programs)	
Faculty (\$4	0 annually) For University/Co	llege faculty		
Young Pro	ofessional (\$75 annually) Fo	or young professionals 35 year	ars of age or less that do not	have the necessary
credentials or experience but are working	g towards full membership			
	Member (\$195 annually) fo			
have the necessary designations to becor offered a \$100 discount on one EFPCSN	•		ncial planning process. Asso	ociate Members are
Signature:		Date:		
Recommended by Member:				
-	(please print)			
Signature of Member:				
Regular Membership cost: \$17 www.efpcsnj.org. Corporate			ership application on	line at

Fax or mail completed application to: Estate & Financial Planning Council of Southern NJ, PO Box 460 Collingswood, New Jersey 08108 Fax: 856-210-1619