

The Estate Planning Council of Naples, Inc.
APPLICATION FOR SUSTAINING MEMBERSHIP

Name: _____

Business Address: _____

Firm or Company: _____

Profession: _____

Discipline: ☐ Attorney ☐ CPA ☐ Financial Planner ☐ Trust Officer
 ☐ Chartered Life Underwriter

Degrees, Licenses & Certifications: _____

Home Address: _____

Business phone: _____ Business Fax: _____

Cell phone: _____ Email: _____

I qualify as a Sustaining Member because: ☐ I served as President of the Estate Planning Council of Naples, Inc. in years _____, or ☐ I have been a member of this Estate Planning Council for _____ years (minimum 15 years) and/or the Estate Planning Council of _____ for _____ years (minimum 15 years) and I am fifty-five (55) years of age or over.

Your application must be submitted with the following in order to be deemed complete:

1. A check for \$50 made payable to The Estate Planning Council of Naples, Inc. This covers your application fee of \$50. If you are not a current member you should make the check for \$125 to cover the application fee and your first year's dues of \$75. Upon approval of your request for Sustaining Membership status, you may attend the dinner meetings of your choice by faxing your reservation, as indicated on the Notice of Meeting, and then paying \$35 for dinner at the door.
2. IF YOU ARE NOT A CURRENT MEMBER, include the attached Letter of Recommendation signed by two current members of the Council, one from your discipline and the second from a different discipline. Attorneys applying, please indicate whether or not you are a current member of the Florida Bar.
3. Your signature on the Acceptance of Principles form.
4. **PLEASE ENCLOSE YOUR BUSINESS CARD.**

Return your completed application, check and supporting documents to:

Marsha Stefan, EPC Administrator
c/o Timely Concierge, LLC
1294 Grand Canal Dr., Naples, FL 34110
Email: Marsha@timelyconcierge.com
Phone: 239-200-6918