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# GREATER NORTH SHORE ESTATE & FINANCIAL PLANNING COUNCIL

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## MEMBERSHIP APPLICATION

NAME: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

OFFICE ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### PROFESSIONAL QUALIFICATIONS:

Attorney

Accountant

Banker

Financial Planner

Insurance Provider

Other \_\_\_\_\_

### MEMBERSHIP LEVEL:

\_\_\_ **Regular** - minimum of five years of experience with professional qualifications, otherwise ten years of experience required

\_\_\_ **Associate** - minimum of two years of experience with professional qualifications, otherwise five years of experience required

### ESTATE PLANNING EXPERIENCE:

*Describe the length of time, the nature, and in what capacities you have been actively involved in the area of estate planning (use other side or an attached letter if more space is needed):* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATED: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

SEND COMPLETED APPLICATION TO:

Matt Jamieson  
GNSE&FPC - Membership Director  
Email: [matt@jamiesonfs.com](mailto:matt@jamiesonfs.com)