

APPLICATION FOR MEMBERSHIP
NEW HAMPSHIRE ESTATE PLANNING COUNCIL

53 Regional Drive, Suite 1, Concord, NH 03301

Phone: 603/228-1231 Fax: 603/228-2118 Email: mattgatzke@choiceonemail.com

(Please Type or Print)

Your Name _____ Title _____

Your Firm _____

Business Address _____

Business Telephone _____ Business Fax _____

E-Mail Address _____ Web Site _____

Important: Please indicate by checking the box if you would like visitors to the Council's web site to be able to link directly to your e-mail address: yes, please link to my email address.

Membership in the following: (Please check one)

- N.H. Bar Association _____
- Financial Services Professionals registered with or
licensed by the State of New Hampshire _____
- N.H. Society of Certified Public Accountants _____
- Officer of N.H. Bank having Trust Powers _____
- Associate Member _____

Years practiced in estate planning. _____ (minimum of one year)

Sponsor's Name _____ Telephone _____

Sponsor's Business Address _____

Sponsor Recommendation _____

(Signature of Sponsor)

Please enclose check in the amount of \$185 for Annual Dues made payable to N.H. Estate Planning Council. The fiscal year of the council runs from June 1- May 31. Dues may not be prorated for partial year membership with the exception of applicants approved at March and May meetings. No other exceptions. Dues includes attendance at regular bi-monthly dinner meetings (Sept., Nov., Jan., Mar.) and the Annual Meeting in May.