

TO: Board of Directors, Estate Planning Council of Rhode Island



FROM: _____ DATE: _____

Ladies and Gentlemen:

I hereby propose the following individual for membership in the Estate Planning Council of Rhode Island

Name: _____

(Please print or type)

Title at Company: _____

Firm (Business) Name: _____

Contact Address: _____

E-mail Address: _____

Phone number: _____ Web site: _____

This individual is actively engaged in the estate planning area in RI as a: (select one)			
<input type="checkbox"/>	Banker active in Trust and/or Wealth Management	<input type="checkbox"/>	Lawyer
<input type="checkbox"/>	Certified Financial Planner	<input type="checkbox"/>	Planned Giving Officers of Not-For-Profit Organizations
<input type="checkbox"/>	Certified Public Accountant (including Enrolled Agent)	<input type="checkbox"/>	Other: Specify:
<input type="checkbox"/>	Chartered Life Underwriter	<input type="checkbox"/>	

List any additional states in which you are licensed to practice: _____

Print Name of Sponsor: _____

Print email: _____

Signature: _____

Second to Nomination

Print Name of Seconder: _____

Print email: _____

Signature: _____

Email completed form to EPCRI Secretary at admin@epcri.org

EPCRI SECRETARY USE

_____ Date emailed to Board

_____ Date Dues Notice sent \$

_____ Date Approved

_____ Date Welcome Letter sent

_____ Date to website

Revised 08/2022