

# **Santa Clara County Estate Planning Council**

## **New Member Application**

**Eligibility:** New members must meet minimum requirements of their category.

### **Articles of Association, Section III. Membership**

**1. Attorneys:** Must have practiced law for two years and be a member of the State Bar of California. In addition, must meet one of the following requirements:

- (a) Be designated a Certified Specialist in Taxation Law, and/or Estate Planning, Trust a Probate Law, by the State Bar of California, Board of Legal Specialization.
- (b) Be a member of the Section of Taxation or Section of Real Property, Probate and Trust Law of the American Bar Association.
- (c) Be a member of the Tax Section or Estate Planning Trust and Probate Law Section of the State Bar of California.
- (d) Be a member of an equivalent section or committee of the County Bar Association in the County in which they are practicing.

**2. Certified Public Accountants:** Must have practiced two years and be a member in good standing of their Chapter of the California Society of Certified Public Accountants or the American Institute of Certified Public Accountants.

**3. Trust Officers:** Must have been active in the Trust field for two years and be an Officer of their Bank or Trust Company, or be a Certified Trust Financial Advisor.

**4. Life Underwriters:** Must be a Chartered Life Underwriter (CLU) and/or a Chartered Financial Consultant (ChFC) and a member of The Society of Financial Service Professionals and a member of The Nation Association of Insurance and Financial Advisors (NAIFA)

**5. Other Estate Planning Professionals:** Qualified persons who do not practice their profession within the first four categories may be eligible for membership in this category. The Board of Director shall decide whether a person who applies for a membership in this category is sufficiently active in Estate Planning to warrant membership in the Council. The following individuals are deemed to meet these requirements:

(a) Members of the development office of a Charitable or other Non-Profit organization or individuals whose business consists of being charitable gift planning consultants, and who have practiced in the field for a minimum of two years.

(b) Investment advisors who have a minimum of two years of experience and carry either a Certified Financial Planner (CFP®), Charter Financial Analyst (CFA), or Certified Investment Management Analysts (CIMA) designation and are members of the Financial Planning Association (FPA) or their applicable professional organization.

(c) Individuals who are qualified fiduciaries operating a fiduciary service with at least two years of experience in the field and who are members of the Professional Fiduciary Association of California (PFAC).

(d) Individuals who are in the valuation or appraisal business who hold an American Society of Appraisers (ASA), Certified Valuation Analysis (CVA), Member Appraisal Institute (MAI), or an Accredited Business Valuation (ABV) credential with at least two years of experience in the field.

(e) Individuals who are either actuary or pension consultants and who have two years of experience and are either Full Service Actuaries (FSA) or Qualified Pension Administrators (QPA) and are members of either the American Academy of Actuaries, American Society of Pension Actuaries, American Society of Pension Professionals and Actuaries (ASPPA) or Society of Actuaries or are Certified Pension Consultants (CPA).

(f) Individuals who can show that they have at least two years of experience in the Estate, Trust and/or Charitable field and who the Board, in its discretion, believes would be valuable contributors to the membership.

***Note: Per the Articles of Association – all members are required to attend  
a minimum of four programs per fiscal year***

## Required Information for New Members

Name: \_\_\_\_\_ Designations: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### 1. Profession

- Attorney  CPA  Trust Officer  
 CLU/ChFC  Other Estate Planning Professional \*\*

### 2. Eligibility

- I am a member of the State Bar of California and a member of \_\_\_\_\_ Section  
 I am a Member of the \_\_\_\_\_ Chapter of the California Society of CPAs or American Institute of CPAs  
 I have been active in the Trust field for at least two years and am an Officer of my Bank or Trust Company  
 I am a member of the \_\_\_\_\_ Chapter of SFSP and a member of the \_\_\_\_\_ Chapter of NAIFA

3. \_\_\_\_\_

*Print Name*

4. \_\_\_\_\_

*Signature to Certify Profession and Eligibility*

5. **Attach a business card.** It will be used to create your record – please make sure it is complete.
6. **Attach a resume or personal backgrounder.** It will be used to evaluate your application by the Selection Committee.
7. **Obtain two signatures** from current members.
8. Either enclose a check, **payable to SCCEPC**, or fill out the appropriate credit card information below for:
- Regular Council Membership \$65.00** (Pay for and attend a minimum of 4 additional dinner meetings during the fiscal year at the regular membership fee)
- Premium Membership \$300** (Includes Membership fee and all 8 dinners (savings \$45). Members must RSVP for each dinner indicating food preference, however. No further payments will be due. Unused dinners will not be refunded and cannot be transferred).

### Credit Card Options

VISA  Mastercard Account # \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Name as written on the card: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Signature: \_\_\_\_\_

9. **Mail this completed form**, a business card, and your check or credit card information to:

SCCEPC, P.O. Box 26130, San Jose, CA 95159-6130

**\*\* As an applicant in the Other Estate Planning Professional Category, the following items support my application:**

- I devote \_\_\_% of my time to Estate Planning matters for clients.
- I hold the following professional qualifications:  
\_\_\_\_\_
- I've attached two letters of recommendation from current members of SCCEPC verifying my practice in the field of Estate Planning for a period exceeding five years.

### Required Information

Two Sponsors for Membership Consideration

a. \_\_\_\_\_  
*Name & Signature*

b. \_\_\_\_\_  
*Name & Signature*