NEW MEMBERSHIP APPLICATION
2025-2026

AKRON TAX AND ESTATE PLANNING COUNCIL

Annual Membership -- $125.00

Luncheon -- $45 per luncheon attended

Return this form to admin@atepc.org

Pay your annual membership and ongoing luncheon dues online at: https://atepc.org/membership

I HEREBY APPLY FOR MEMBERSHIP IN THE AKRON TAX AND ESTATE PLANNING COUNCIL

NAME: _____

PROFESSIONAL DEGREES / DESIGNATIONS HELD (check all that apply):
☐ Atty ☐ CPA ☐ CLU® ☐ ChFC® ☐ AEP® ☐ CFA ☐ CFP® ☐ CTFA ☐ CWS® ☐ CAP® ☐ MSFS

☐ Other: _____

WHAT IS YOUR PRIMARY PROFESSIONAL DISCIPLINE? (choose one):
☐ Attorney ☐ Accountant ☐ Trust Officer ☐ Insurance Professional ☐ Financial Planning Professional ☐ Planned Giving Professional

☐ Other, please explain: _____

YEARS OF PRACTICE:_____

PRESENT EMPLOYER:

_____

BUSINESS ADDRESS:

_____

BUSINESS CITY, STATE & ZIP CODE:_____

BUSINESS PHONE: _____ FAX: _____

E-MAIL:_____

Please include any additional information you feel would be helpful for us to know:

_____
_____
_____

Would you like your profile included on the Akron Tax and Estate Planning Council website:_☐____

Please indicate if you have any special instructions for correspondence (i.e. staff or team member who should receive correspondence, in lieu of sending directly to you). If so, please indicate this person's contact information.

NAME:_____

E-MAIL:_____

PHONE:_____

Initial Here if you paid dues by credit card online:_____

Recommended to the Council by:
1. _____

2. _____

APPLICANT SIGNATURE*:*_____

DATE*:*_____