ESTATE PLANNERS' COUNCIL OF HALTON
MEMBERSHIP INFORMATION and APPLICATION

We appreciate your interest in joining the Estate Planners' Council of Halton (EPCOH). Please read the following before completing the application form.

Criteria for Membership

1. Members shall belong to at least one of the member categories, **being an accountant, lawyer, insurance/investment advisor or a related estate professional.**
2. Members must:

- Have at least 5 years of full-time business experience in estate planning*
- Hold a professional designation such as, but not limited to, CFA, CFP, CLU, PFP, RFP, CAIB, CIP, CPA, LLB, JD, TEP, CEA, or a combination of these.
- Be a member of good standing within their regulatory body.
- Participate actively at meetings of the Council and be willing and able to contribute by virtue of their technical knowledge, experience, and personality; and
- Live and/or be practicing in the Region of Halton business community.

*If you cannot meet the criteria of at least five years of full-time business experience, you may apply as a non-voting member in the interim, provided that you have the specific knowledge, experience and interest in contributing towards the advancement and development of the objects of the Council. Visit www.EPCOH.ca for more on membership.

Process

Please complete the Membership Application (next page) and send it to our membership officer, **Angela Fennelow** by clicking on the SUBMIT button at the bottom. If you require more information, please contact her at **angela.fennelow@sunlife.com**

The executive committee reviews all completed membership applications and you will normally hear from EPCOH within two weeks. Upon acceptance of your application, you receive an invoice for the annual membership fee payable on receipt. The membership fee for the 2023-2024 year is $500.00 and is non-refundable. The fee is payable within 5 business days of receipt and should be e-transferred to epcohtreasurer@outlook.com.

We look forward to welcoming you to EPCOH at the next meeting (see meeting schedule on the website). Be sure to confirm your attendance!

ESTATE PLANNERS' COUNCIL OF HALTON

APPLICATION FOR MEMBERSHIP

DATE OF APPLICATION	
NAME	
OCCUPATION	
MEMBERSHIP CATEGORY APPLIED FOR *(Choose between accountant, lawyer, investment/insurance advisor OR estate professional)*	
PROFESSIONAL DESIGNATION(S) *(Please list all as applicable – if none applies, see experience question below)*	
EMPLOYER	
BUSINESS ADDRESS	
EMAIL ADDRESS	
BUSINESS/CELL PHONE	
HOME ADDRESS	
EXPERIENCE IN ESTATE PLANNING *Please summarize a brief outline of your professional and academic qualifications and related business experience in the estate planning field for the <u>past 5 years.</u>*	
If your business address is outside of Halton, please outline your connection to the Region of Halton.	
How did you hear of **EPCOH**?	
Referring **EPCOH** member, if applicable	

I hereby certify that the information provided herein is true and correct.

_____

Your signature