

# Woodland Hills Tax & Estate Planning Council Application for Membership

## Mission Statement

The Mission of the Woodland Hills Tax & Estate Planning Council, Inc. is to promote the highest quality estate and tax planning services - by developing and improving the capabilities of Council members.

## Application Process

This application will be considered when:

- Signed by the Applicant and submitted with a cover letter on the applicant's letterhead; *and*
- Signed by two sponsors who are current members of the Woodland Hills Tax & Estate Planning Council, Inc.; *and*
- Submitted with a \$450 check payable to "Woodland Hills Tax & Estate Planning Council, Inc." for the first year's dues. (Applicants who join during the course of the Council's fiscal year will receive a prorated invoice for their dues.)

Please submit the application, via mail, fax, or scan/email, to our Membership Chairperson,

Lisa Nelsen  
Bank of the West  
213-972-0263 phone  
213-972-0426 fax  
300 So. Grand Avenue, 6th Floor  
Los Angeles, CA 90071  
lisa.nelsen@bankofthewest.com

Submission of a check with the application does *not* constitute acceptance as a member. The completed application will be reviewed by the Council's Membership Chair and/or Membership Committee, who will then report to the other Directors. Upon a thorough review of the application the Board of Directors will then act upon the application.

## Application and Qualifications

Name \_\_\_\_\_

Firm \_\_\_\_\_

State Bar/License/Association/Certification Number \_\_\_\_\_

Business Address \_\_\_\_\_

Phones(s) Office \_\_\_\_\_ Cell \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

In addition to the other membership requirements, the Applicant must have a professional interest in estate and or tax planning and be a member in good standing of one of the following groups:

- Attorney
- Certified Public Accountant and or Enrolled Agent
- Certificated Financial Planner
- Trust Officer
- Chartered Life Underwriter
- Chartered Financial Consultant
- Special Interest Member [a director, officer, manager or its equivalent of a business or organization that performs estate related services such as (a) trust and estate administration. (b) wealth management, or (c) planned giving]

1. The membership category, which most accurately matches my area of practice, is: *(check one)*

- Attorney at Law
- Certified Public Accountant/Enrolled Agent
- Certified Financial Planner
- Trust Officer
- Chartered Life Underwriter
- Chartered Financial Consultant
- Financial Advisor
- Estate Planning Specialist
- Accredited Estate Planner
- Other *(describe)*

2. I hold at least one of the following certifications or degrees: *(circle all that apply)*

JD   CPA   EA   CFP   CTFA   CLU   ChFC   Other \_\_\_\_\_

3. My primary business location is in the following: *(circle one)*

San Fernando Valley   Los Angeles County   Ventura County

4. How long have you been working in your current discipline? \_\_\_\_\_ years

5. Tell us about your estate planning experience:

a. When did you begin working in estate planning? \_\_\_\_\_

b. Have you worked continuously in estate planning since that time? \_\_\_\_\_

c. If not, please explain \_\_\_\_\_

\_\_\_\_\_

d. What percentage of your professional time is spent in estate planning? \_\_\_\_\_ %

6. Describe your experience in the estate planning field and explain why this experience qualifies you for membership in this organization.

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7. Describe your purpose(s) for joining the Woodland Hills Tax & Estate Planning Council, Inc..

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8. Education (degree, school, year)

Undergraduate Degree: \_\_\_\_\_

Advanced Degree(s): \_\_\_\_\_

9. In addition to your sponsors, please list any other references you would like to provide.

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10. Please provide any other information that you think would be helpful as we evaluate your application.

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## Signatures & Attestation

I hereby apply for membership in the Woodland Hills Tax & Estate Planning Council, Inc..

I attest that the information I have provided in this application (including any supporting documents and other information) is true and correct. I understand that providing false or misleading information is grounds for immediate termination of membership.

I consent to the Woodland Hills Tax & Estate Planning Council, Inc. investigating my background, including but not limited to, verifying the information I have provided in this application.

I will not use my membership in any form of advertisement or for solicitation of business. I understand that the Woodland Hills Tax & Estate Planning Council, Inc. Membership roster is confidential and restricted in its usage (with certain exceptions expressly authorized by the Board of Directors).

I understand that my continued membership will depend upon my regular attendance at official meetings (usually held monthly) of the Woodland Hills Tax & Estate Planning Council, Inc..

I recognize that the Woodland Hills Tax & Estate Planning Council, Inc. has the right to deny membership to any Applicant, without explanation, as it deems appropriate.

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Applicant's Signature

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Date

Woodland Hills Tax & Estate Planning Council, Inc.

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Sponsor's Signature

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Date

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Sponsor's Signature

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Date