



Northern Virginia Estate Planning Council Application for Membership

I hereby make application for membership in the Northern Virginia Estate Planning Council. I agree to participate actively in the organization and to abide by the Council's bylaws and regulations.

Name: _____
Last First Middle Initial

Name as it should appear on badge: _____

Preferred Address: Business Home Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Employer: _____

Occupation*: Attorney CPA CFP/ ChFC
 Trust Officer CLU Enrolled Agent
 Accredited Valuation Expert Planned Giving Professional

*If your occupation is not listed here, please email nvepc@ascent-management.com and request the Associate Member application.

Please select a committee you'd like to join:

Diversity, Equity & Inclusion (DEI) Governance Membership Programs Sponsorship

Two member sponsors are required:

Sponsor in your professional discipline: Signature: _____

Phone: _____ Print Name: _____

Sponsor in any of other 7 disciplines: Signature: _____

Phone: _____ Print Name: _____

A \$25 administrative fee must accompany this application. It is understood that this fee will not be refunded in the event the application is rejected. You can pay online at <https://www.nvepc.org/members/renewal> and select "Membership Application \$25.00" or mail a check, payable to NVPEC, to 3337 Duke Street, Alexandria, VA 22314

Application Accepted by Executive Committee:

Date: _____ by: _____
President or Chairperson, Membership

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Email: NVEPC@ascent-management.com * Website: www.nvepc.org