Group Membership Application

Thank you for your interest in FPA Group Membership. Please fill out this application and return to FPA via fax, mail or email. Questions can be directed to your dedicated FPA member service advocate at 800.322.4237, option 2.

Company & Contact Information

FIRM INFORMATION

Firm Name: _____

Address: _____

Telephone: (____)_____ Fax: (____)_____

Website: _____

Approximate # employees: _____ Approximate # financial planners: _____

Does the firm reimburse employees for FPA dues?

☐ Yes ☐ No

Primary reason for seeking FPA Group Membership: _____
_____

How did you hear about FPA Group Membership?

- ○ Email
- ○ Mail
- ○ Website
- ○ *Journal of Financial Planning*
- ○ Member referral: _____
- ○ Other: _____

PRINCIPAL/CEO CONTACT INFORMATION

Name: _____

Title: _____

GROUP BILLING CONTACT INFORMATION

Name: _____

Title: _____

Telephone: (____)_____ Ext._____

Email: _____

GROUP MEMBERSHIP ADMINISTRATOR

This individual will be your firm's internal point of contact.

Name: _____

Title: _____

Telephone: (____)_____ Ext._____

Email: _____

Select your Group Membership Tier

Please select your level of Group Membership and enclose your tier dues payment along with this application.

Tier Options	Annual Cost	Select One	Firm and Individual Benefits
Tier One	**$250**	☐	15% off individual FPA membership dues 10% off FPA national conferences: FPA Experience, FPA Retreat, FPA Business Solutions Recognition at FPA Experience and on FPA's website FPA Group Member logo
Tier Two	**$500**	☐	15% off individual FPA membership dues **15%** off FPA national conferences: FPA Experience, FPA Retreat, FPA Business Solutions **20%** off webinars through the FPA Virtual Learning Center* Recognition at FPA Experience and on FPA's website FPA Group Member logo **Free 30 day Career Center listing**
Tier Three	**$750**	☐	15% off individual FPA membership dues **20%** off FPA national conferences: FPA Experience, FPA Retreat, FPA Business Solutions **20%** off webinars through the FPA Virtual Learning Center* Recognition at FPA Experience and on FPA's website FPA Group Member logo **Free 30 day Career Center listing** **Electronic copy of FPA's *Financial Planning Compensation Study***

* Webinar discount excludes Ethics courses and pre-packaged programs.

Submit application and payment to:

Mail: 7535 E. Hampden Ave, Ste 600
Denver, CO 80231

Email: GroupMembership@FPAnet.org

Phone: 800.322.4237, opt. 2
Fax: 303.759.0749

Group Payment Information

How would you like to setup your payment information?

☐ **Individuals pay their own dues:** employees will be given a promotion code to use throughout the year as they join or renew individually

☐ **Firm pays all dues:** your firm will receive one annual invoice with all individuals synced to the same renewal date

Please enclose your tier dues payment information with this application.

☐ Company Check (made out to FPA) Send date: _____

☐ Visa ☐ American Express ☐ MasterCard ☐ Discover

Total due: $_____ for Group Membership tier dues.

Cardholder Name: _____

Card Number: _____ Exp__/___

Signature: _____Date:_____

Terms and Conditions

As a Group Member of FPA, _____, agrees to:
(Company Name)

[1] Cooperate with and abide by FPA's Institutional Code of Conduct.
[2] Embrace the FPA Primary Aim to be the community that fosters the value of financial planning and advances the financial planning profession.
[3] Avoid representing to anyone that FPA sanctions, approves, endorses, or serves as a reference for any company, its affiliates or its products/services.

FPA in return will provide the stipulated benefits for Group Membership. Those benefits can be amended over time by FPA Board of Directors.

I HAVE READ THE ABOVE STATEMENTS AND UNDERSTAND AND WILL ABIDE BY THE AGREEMENT. Agreed to by:

Signature _____ Date: _____

Printed Name:_____ Title:_____

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Group Membership Roster

Please list the employees who will be part of your group membership in the space below. A signed individual membership application (separate) will be required for all new members. Employees receive 15% off their individual membership dues:

Membership Category	Rate	Discounted Rate
CFP® Professional:	~~$399~~	$339
2nd Year CFP® Professional:	~~$299~~	$254
1st Year CFP® Professional:	~~$199~~	$169
Allied Professional, Financial Services:	~~$299~~	$254
Allied Professional, Non-Financial Services:	~~$199~~	$169

FPA Membership Status:	Employee Name:	Email Address:
☐ New ☐ Current	_____	_____
☐ New ☐ Current	_____	_____
☐ New ☐ Current	_____	_____
☐ New ☐ Current	_____	_____
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