

# Membership Application



**WOMEN IN INSURANCE & FINANCIAL SERVICES**

WIFS membership is calendar year based. Individuals who join during the year pay prorated dues. See attached chart for prorated dues. Membership cannot be transferred and is non-refundable.

Return application to:

**MEMBERSHIP**

WIFS National Headquarters  
136 Everett Road | Albany, NY 12205

office@wifsnational.org | Fax 518.935.9232  
518.694.5506 | Toll Free 866.264.WIFS (9437)

JOIN ONLINE AT

**WIFSnational.org**



## Membership Information

NAME (FIRST, MI, LAST) \_\_\_\_\_

CURRENT EMPLOYER \_\_\_\_\_

POSITION/TITLE \_\_\_\_\_

PREFERRED EMAIL \_\_\_\_\_

WORK ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

WORK PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_

### NON-PARTNER AFFILIATED NATIONAL DUES

National Dues ..... \$230.<sup>00</sup>

*\* Individuals who are not affiliated with any of the Partners for Excellence, are required to pay the Non-Partner Affiliated National dues.*

### PARTNERS FOR EXCELLENCE

WIFS partners with companies to promote our mission. Individuals with a partners career contract receive a 50% membership discount that is subject to company verification. Please refer to [www.wifsnational.org](http://www.wifsnational.org) for current Partners for Excellence Information.

- |  |  |
|--|--|
| <input type="checkbox"/> Ameritas                | <input type="checkbox"/> New York Life |
| <input type="checkbox"/> Guardian                | <input type="checkbox"/> Penn Mutual   |
| <input type="checkbox"/> Lincoln Financial Group | <input type="checkbox"/> Prudential    |
| <input type="checkbox"/> MetLife                 |  |
| <input type="checkbox"/> Mutual of Omaha         |  |

### PARTNERS AFFILIATED NATIONAL DUES

Partner Affiliated Dues ..... \$130.<sup>00</sup>

### PAYMENT INFORMATION

Partner OR Non-Affiliated National Dues: \$ \_\_\_\_\_

Local Chapter Dues: \$ \_\_\_\_\_

**Total Dues:** (National + Chapter) \$ \_\_\_\_\_

Sending Check or Money Order (Payable to WIFS in US dollars)

Charge to:  Visa  MasterCard  American Express

*Payments to WIFS are not deductible as charitable contributions for federal income tax purposes. They may be deductible under other provisions of the Internal Revenue Code. No portion of your dues payment is attributable to lobbying expenditures.*

### CHAPTER MEMBERSHIP

All members may join a local WIFS chapter. Members located in areas without active chapters receive all National benefits and are considered Members-at-Large. Please indicate your chapter preference:

- Member-at-Large [\$0]
- AK: Anchorage [\$25]
- CA: Los Angeles [\$50]
- CO: Denver [\$30]
- FL: Gold Coast [\$50]
- FL: Northeast Florida [\$25]
- FL: South Florida [\$35]
- GA: Atlanta [\$50]
- MD: Baltimore [\$40]
- MI: Michigan [\$50]
- MN: Twin Cities [\$50]
- MO: St. Louis [\$60]
- NE: Lincoln - Omaha [\$25]
- NJ: North Jersey Gateway [\$65]
- NY: Albany [\$30]
- NY: New York City [\$55]
- OR: Portland [\$65]
- PA: Philadelphia/Tri-County [\$50]
- TX: Central Texas [\$25]
- TX: Dallas [\$50]
- VA: DC Metro [\$45]
- New Chapter: \_\_\_\_\_ \$ \_\_\_\_\_

Please provide the following demographic information to assist WIFS with strategic planning. Information will remain strictly confidential and be anonymously aggregated in support of corporate partnership and industry promotion initiatives.

Birth Year: \_\_\_\_\_

Income:  Under \$25K  \$25-75K  \$75-125K  
 \$125-\$250K  \$250-500K  \$500K-1M  
 1M+

What year did you join the industry? \_\_\_\_\_

Have you obtained any of the following designations?  
Check all that apply.

- CASL  CFP  ChFC  CLF  CLTC  
 CLU  CPA  CSA  JD  LUTCF  
 RHU  Other \_\_\_\_\_

Have you obtained any of the following insurance and securities licenses? Check all that apply.

- Insurance  Series 6  Series 7  Series 11  
 Series 63  Series 65  Series 66

Primary Industry Affiliation:

- Accounting/Banking  Insurance  Investments  
 Financial Planning  Legal  Mortgage  
 Other \_\_\_\_\_

What best describes your position?

- Attorney  Business Owner  CPA  
 Home Office  Industry Executive  Manager  
 Producer  Other \_\_\_\_\_

Do you regularly speak on industry topics?

- Yes  No

Would you be interested in mentoring another member?

- Yes  No

CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_

NAME AS IT APPEARS ON CARD \_\_\_\_\_

SIGNATURE \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

*Attract. Develop. Advance.*