

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.

□ \$250-500K

□ \$500-1M

Birth Year:

Income: □ Under \$25K

□ \$25-75K

	575-125K 5125-250K	□ \$1M+		
What year did	d you join the in	dustry?		
	ained any of the Check all that a			
CASL CDFA CFP ChFC	CLTC CLU CSA FMLI LUTCF	□ RHU □ RICP □ Other:		
	ained any of the I securities licer			
☐ Insurance☐ Series 6☐ Series 7	☐ Series 11☐ Series 63☐ Series 65☐	□ Series 66		
Primary Indus	stry Affiliation:			
☐ Investment	/Banking □ In s □ Financial I lortgage □ Ot	Planning		
What best de	scribes your po	sition?		
☐ Attorney ☐ Business ☐ Owner ☐ CPA	☐ Home ☐ Office ☐ Industry ☐ Executive	□ Manager □ Producer		
Do you regularly speak on industry topics?				
□ Yes	□No			
Would you be	e interested in m ber?	nentoring		
□ Yes	□No			
serving in the	r served or are U.S. Military?	you currently		
□ Yes	□ N0			

Membership Application

Return this application to:

MEMBERSHIP

WIFS National Headquarters 1800 E. Ray Rd., Suite A106, Chandler, AZ 85225

office@wifsnational.org

Fax: 518.935.9232 | Phone: 866.264.9437

☐ KS: Kansas City.....\$50
☐ MI: Michigan\$50

RENEW ONLINE AT:

WIFSnational.org/membership

WIFS Membership is rolling and calendar year based. All members renew each year on the day they originally registered. Membership cannot be transferred and is non-refundable.

Membership Information				
NAME (FIRST, MI, LAST)				
CURRENT EMPLOYER		POSITION/TITLE		
PREFERRED EMAIL				
WORK ADDRESS		CITY/STATE/ZIP		
HOME ADDRESS		CITY/STATE/ZIP		
WORK PHONE		CELL PHONE		
REFERRED BY				
National Membership Partner Affiliation Please ide of the following*:				
☐ Ameritas ☐ Cambridge ☐ Principal ☐ Prudential	Lincoln Fin	ancial □ National Life Group		
Large without a chapter affiliat	ion. In addition more formin	or more chapters, or join as Memb on to the chapters listed below, WIF og throughout the year. Visit wifsna	S has	
☐ Member-at-Large	\$0	☐ MN: Twin Cities	\$50	
☐ Aspiring:		□ NE: Lincoln - Omaha	\$50	
□ AK: Anchorage	 \$25	☐ OH, IN & KY: Ohio River Va	alley \$25	
□ AZ: Phoenix	\$40			
☐ CA: Los Angeles	\$50	☐ OR: Portland	\$80	
☐ CA: Northern California		□PA: Greater Pennsylvania.	\$50	
□ CO: Denver	\$50	□ PR: Puerto Rico	\$45	
☐ FL: Gold Coast	\$50	TX: Dallas	\$50	
☐ FL: South Florida		☐ TX: Houston	\$50	
☐ FL: West Florida	\$45	□ WA: Washington State		
☐ GA: Atlanta		□ WI: Wisconsin	\$25	

Payment Information

Please select one of the following:		with a single annual payment al dues in monthly installments
Local Chapter Dues	\$\$ \$\$	☐ I agree to opt in for membership autorenewal and understand that my credit card will be charged the current WIFS dues rate each year on the day auto-renew was originally activated.
Charge to: □ Visa □ Master Card	☐ American Express ☐ Discover	
☐ Send Check/Money Order (Paya	ble to WIFS in US Dollars)	
CARD NUMBER		
EXPIRATION DATE	SECURITY CODE	
NAME AS IT APPEARS ON CARE		
SIGNATURE		
BILLING ADDRESS		
CITY	STATE	ZIP

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.

Last updated: December 2023