



NEW MEMBER APPLICATION

Mr. Mrs. Ms.

Primary Mailing Address: Business Home

Last Name: _____ First Name: _____ Middle Initial: _____

Title: _____ Business Name: _____

Business Address: _____

City/State or Province: _____ State: _____ Zip/Postal Code: _____ Country: _____

Business Phone: _____ Business E-mail: _____

Business Fax: _____ Cell Phone: _____

Home Address: _____

City/State or Province: _____ State: _____ Zip/Postal Code: _____ Country: _____

Home Phone: _____ Home E-mail: _____

As a member of Investments & Wealth Institute, I understand that by providing my email address, I hereby consent and opt in to receive email communication sent by or on behalf of Investments & Wealth Institute. Membership dues are not refundable and not transferable. Your membership dues include a subscription to Investments & Wealth Monitor. Members may not deduct the subscription price from dues.

MEMBERSHIP DUES

Membership Package Options (two-years): Basic: \$395 Signature: \$890 Elite: \$1,190 Pricing only includes membership. Certification not included.

Method of Payment: Check (payable to Investments & Wealth Institute for the total amount) MasterCard VISA American Express Discover

Credit Card #: _____ Exp: _____

Name on Card: _____ Signature: _____

Membership dues are not refundable and not transferable. Reactivations and renewals are not eligible for new member status.

DEMOGRAPHICS

Education: (check only one)

- High School
 Some College, No Degree
 Associate's Degree
 Bachelor's Degree
 Master's Degree
 Law Degree
 Doctoral Degree
 Other _____

Your Primary Professional Responsibility:

(check only one)

- Accountant
 Attorney
 Bank/Trust Officer
 Investment Consultant
 Corporate Officer
 Investment Analyst/Research
 Financial Planner
 Client Services
 Fund Trustee
 Pension Analyst
 Securities Broker
 Money Manager
 Wholesaler
 Wealth Manager/Advisor
 Other

Total assets under your advisement:

(check only one)

- < \$50 M
 \$50 M-\$150 M
 \$150 M-\$250 M
 \$250 M-\$500 M
 \$500 M-\$1 B
 > \$1 B
 Not Applicable

Current Number of Clients you are Advising: _____

Your Firm Affiliation: (check only one)

- National Wire House
 Regional Broker Dealers
 RIA
 Bank/Trust
 National/Regional Independent
 Investment Management Wholesalers
 Industry Service Providers
 Money Managers
 Other

Types of Clients: (check all that apply)

- Individuals
 Corporations
 Public Funds
 Retirement/Pension
 Endowments, Foundations, Assn.
 Family Office
 Other

Your Designations: (check all that apply)

- RICP
 CFA®
 CFP®
 CPA
 Other

Your Experience: (check only one)

- 1-3 years
 4-10 years
 11-20 years
 21+ years

Gender:

- Male
 Female
 Non-Binary
 Prefer not to answer

Date of Birth: _____

TO APPLY:

Web—Apply electronically by visiting the Investments & Wealth Institute website at www.investmentsandwealth.org, and login to your dashboard.

Mail—Mail your completed membership form along with a check or credit card number to:

Investments & Wealth Institute
5619 DTC Parkway, Ste. 600
Greenwood Village, CO 80111

Fax—Fax your completed membership form along with a credit card number to Investments & Wealth Institute at +1 303-770-1812.

E-mail—Complete this form electronically and select the "Submit" button below.