



**2010 Membership Application**  
**\$100\***

*New*     *Renewal*

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

If military or overseas\*, please also list city and country:

City \_\_\_\_\_ Country \_\_\_\_\_

Is this work  or home  ?

Employer \_\_\_\_\_

Title \_\_\_\_\_

Phone (o) \_\_\_\_\_ (h) \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

**Professional Designations:**

- ACC
- AFC
- CEBS
- CFCS
- CFS
- CFP
- CHC
- ChFC
- CLU
- CPA
- Other

**Employment Type:**

- Banking, Credit Union
- College, University
- Consumer Credit Counseling
- Employee Assistance
- Extension Service
- Financial Counseling
- Legal Services
- Military Services
- Retired
- Other

***\*An additional shipping fee of \$35.00 will be charged for addresses outside of the United States***

Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Name of Cardholder \_\_\_\_\_

Signature \_\_\_\_\_

Fax to: (614) 485-9621 or mail payment to:  
1500 W Third Avenue, Suite 223 Columbus, OH 43212