

2021 MEMBERSHIP RENEWAL



WOMEN IN INSURANCE & FINANCIAL SERVICES

WIFS membership is calendar year based. All individuals renew annually on January 1st for the full dues amount. Membership cannot be transferred and is non-refundable.

Return renewal form 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)

RENEW ONLINE AT

WIFSnational.org/membership



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 _____

NATIONAL MEMBERSHIP National Dues **[\$260.⁰⁰]**

PARTNER AFFILIATION Please identify if you're currently affiliated with any of the following*:
 National Life Group Prudential Principal Lincoln Financial Penn Mutual

CHAPTER MEMBERSHIP All members may join a local WIFS chapter. Members located in areas without active chapters are Members-at-Large. Please indicate your chapter preference:

- Member-at-Large **[\$0]**
- AK:** Anchorage **[\$25]**
- AZ:** Arizona **[\$50]**
- AZ:** Phoenix **[\$40]**
- CA:** Los Angeles **[\$50]**
- CA:** Northern California **[\$50]**
- CO:** Denver **[\$50]**
- FL:** Gold Coast **[\$50]**
- FL:** Northeast Florida **[\$50]**
- FL:** South Florida **[\$40]**
- GA:** Atlanta **[\$50]**
- KS:** Kansas City **[\$50]**
- KY:** Louisville **[\$40]**
- MD:** Baltimore **[\$40]**
- MI:** Michigan **[\$50]**
- MN:** Twin Cities **[\$50]**
- MO:** St. Louis **[\$50]**
- NE:** Lincoln - Omaha **[\$50]**
- NYC&NJ:** New York City - New Jersey **[\$75]**
- OR:** Portland **[\$67]**
- PA:** Central Pennsylvania **[\$50]**
- PA:** Philadelphia Tri-County **[\$50]**
- TX:** Dallas **[\$50]**
- TX:** Houston **[\$40]**
- Aspiring: _____ **[\$25]**

*Partners listed reflect 2018 Partners for Excellence and are subject to change.

PAYMENT INFORMATION

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 Discover

I agree to opt-in for membership autorenewal and understand that my credit card will be charged the current WIFS membership rate annually on January 1 each year.

CARD # _____

EXPIRATION DATE _____ SECURITY CODE _____

NAME AS IT APPEARS ON CARD _____

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.

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 CDFA CFP ChFC CLF
- CLTC CLU CSA FMLI LUTCF
- RHU RICP 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

Have you ever served or are you currently serving in the U.S. military?

- Yes No

YOUR MEMBERSHIP EXPIRES ON DECEMBER 31, 2020

MEMBERSHIP DUES

The WIFS dues process is structured to support an annual renewal date. Based on your affiliation status and chapter membership, please select your dues rate below. Note: New WIFS members pay prorated dues amount based on their join date. The WIFS membership year is January 1–December 31st.

New Member Join Rates

	Annual Dues Rate	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
NATIONAL DUES	\$260. ⁰⁰	\$260. ⁰⁰	\$238. ³³	\$216. ⁶⁷	\$195. ⁰⁰	\$173. ³³	\$151. ⁶⁷	\$130. ⁰⁰	\$108. ³³	\$86. ⁶⁷	\$65. ⁰⁰	\$43. ³³	\$21. ⁶⁷
MEMBERS-AT-LARGE (no chapter affiliation)	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰	\$0. ⁰⁰
\$25 Chapter Dues	\$25. ⁰⁰	\$25. ⁰⁰	\$22. ⁹²	\$20. ⁸⁰	\$18. ⁷²	\$16. ⁶⁴	\$14. ⁵⁶	\$12. ⁴⁸	\$10. ⁴⁰	\$8. ³²	\$6. ³⁴	\$4. ¹⁶	\$2. ⁰⁸
\$30 Chapter Dues	\$30. ⁰⁰	\$30. ⁰⁰	\$27. ⁵⁰	\$25. ⁰⁰	\$22. ⁵⁰	\$20. ⁰⁰	\$17. ⁵⁰	\$15. ⁰⁰	\$12. ⁵⁰	\$10. ⁰⁰	\$7. ⁵⁰	\$5. ⁰⁰	\$2. ⁵⁰
\$40 Chapter Dues	\$40. ⁰⁰	\$40. ⁰⁰	\$36. ⁶⁷	\$33. ³⁰	\$29. ⁹⁷	\$26. ⁶⁴	\$23. ³¹	\$19. ⁹⁸	\$16. ⁶⁵	\$13. ³²	\$9. ⁹⁹	\$6. ⁶⁶	\$3. ³³
\$45 Chapter Dues	\$45. ⁰⁰	\$45. ⁰⁰	\$41. ²⁵	\$37. ⁵⁰	\$33. ⁷⁵	\$30. ⁰⁰	\$26. ²⁵	\$22. ⁵⁰	\$18. ⁷⁵	\$15. ⁰⁰	\$11. ²⁵	\$7. ⁵⁰	\$3. ⁷⁵
\$50 Chapter Dues	\$50. ⁰⁰	\$50. ⁰⁰	\$45. ⁸³	\$41. ⁶⁰	\$37. ⁴⁴	\$33. ²⁸	\$29. ¹²	\$24. ⁹⁶	\$20. ⁸⁰	\$16. ⁶⁴	\$12. ⁴⁸	\$8. ³²	\$4. ¹⁶
\$55 Chapter Dues	\$55. ⁰⁰	\$55. ⁰⁰	\$50. ⁴²	\$45. ⁸⁰	\$41. ²²	\$36. ⁶⁴	\$32. ⁰⁶	\$27. ⁴⁸	\$22. ⁹⁰	\$18. ³²	\$13. ⁷⁴	\$9. ¹⁶	\$4. ⁵⁸
\$60 Chapter Dues	\$60. ⁰⁰	\$60. ⁰⁰	\$55. ⁰⁰	\$50. ⁰⁰	\$45. ⁰⁰	\$40. ⁰⁰	\$35. ⁰⁰	\$30. ⁰⁰	\$25. ⁰⁰	\$20. ⁰⁰	\$15. ⁰⁰	\$10. ⁰⁰	\$5. ⁰⁰
\$65 Chapter Dues	\$65. ⁰⁰	\$65. ⁰⁰	\$59. ⁵⁸	\$54. ¹⁰	\$48. ⁶⁹	\$43. ²⁸	\$37. ⁸⁷	\$32. ⁴⁶	\$27. ⁰⁵	\$21. ⁶⁴	\$16. ²³	\$10. ⁸²	\$5. ⁴¹
\$67 Chapter Dues	\$67. ⁰⁰	\$67. ⁰⁰	\$61. ⁴²	\$55. ⁸³	\$50. ²⁵	\$44. ⁶⁷	\$39. ⁰⁸	\$33. ⁵⁰	\$27. ⁹²	\$22. ³³	\$16. ⁷⁵	\$11. ¹⁷	\$5. ⁵⁸