# MEMBERSHIP APPLICATION FORM



For office use only Membership No:		
www.step.org		

### Please read and complete the section below before submitting your application.

All sections of this form must be completed. Incomplete application forms will not be I have attached to this form an existing CV/resumé processed. (or 500 word document) detailing my trust and/or estate experience. See Section 2 for details. All membership application forms must be sent to your local branch or chapter. They will then forward your application to the STEP Membership Department. Two separate declarations have been provided Your local Branch/Chapter Secretary's details can be found on the STEP website in Section 4. These were signed by a current full at www.step.org/branches-chapters STEP member, my employer or an independent professional. If you have any queries regarding your application, please contact your local Branch/ Chapter Secretary or the STEP office on +44 (0)20 3752 3700 or email step@step.org I understand that I must pay my applicable fees within 30 days of being tentatively approved. See Please keep a photocopy of this form and allow eight to ten weeks for us to process Section 5 for details. your application. I have signed and dated Section 6.

#### Complete the form in English and type or print in BLOCK LETTERS

1. Personal Details	*Indicates mandatory fields
Title (e.g. Mr/Mrs)*:	
First Name(s)*:	
Family Name*:	
Date of Birth:	D D M M Y Y Y
Gender:	Male Female
Job Title*:	
Department*:	
Designation:	
Firm Name*:	
Business Address*:	
PO Box Number:	
City/Town:	
County/State/Province:  Post Code/Zip Code:	
Country:	
Work Email*:	
Telephone Number (incl. area code):	
Mobile Number (incl. area code):	

1. Personal Details (continued)			
Home Address (if different):			
City/Town:			
County/State/Province:			
Post Code/Zip Code:			
Country:			
Home Email:			
Preferred Mailing Address	☐ Work ☐ Home		
Preferred Email Address	☐ Work ☐ Home		

### 2. Experience and Qualifications

#### **For Full Membership**

Has your occupation over the last five years included a significant involvement at a specialist level with one or more of the following: planning, creation, management of and accounting for trusts and estates, executorship administration and related taxes?

#### **For Technician Membership**

Has your occupation over the last two to five years included a significant involvement at a specialist level with one or more of the following: planning, creation, management of and accounting for trusts and estates, executorship administration and related taxes?

Please state the number of years of experience you have in the trust and/or estate field: \_\_\_\_\_\_ years \_\_\_\_\_ months

Please attach to this form an existing CV/resumé (or a 500 word document) detailing your trust and/or estate experience over the last five years for full membership, or two to five years if applying for associate membership. Applications without an attached CV/resumé will not be processed.

## STEP Membership Application Form



2. Experience and Qualifications	5. Annual Membership Subscription Fees and
Please tick the box(es) to show which qualifications you have and include a copy of your signed certificate(s).  Qualified barrister	TEP Registration Fee  Please visit www.step.org/fees for subscription and TEP registration fees  Full membership: Subscription fee + TEP registration fee  Technician membership: Subscription fee only.  You will be sent a request for payment for applicable fees when your membership is approved (pending payment) and not beforehand. Payment options will be listed on your request for payment.  You are required to submit payment within 30 days of being approved (pending payment) otherwise your membership
	will be suspended and you may need to formally re-apply.
3. Branch/Chapter Affiliation	6. Applicant's Declaration
Members of STEP must be affiliated to their local branch or chapter. Please specify which branch or chapter you wish to be affiliated to:	Please read and complete the four sections below before signing this declaration.  I am aware of STEP's Memorandum and Articles of Association,
Completed application forms must be returned to the branch or chapter you have chosen. Details of branches and chapters can be found at www.step.org/branches-chapters	the STEP Code of Professional Conduct, the Disciplinary Rules, and all other regulations (and their amendments) that may be issued by the Society from time to time, as the single worldwide community for trust and estate practitioners, and that I must continue to abide by these which together, are referred to as "STEP's rules". These are published on the STEP website at www.step.org/central-governance
4. Declaration	
Please ensure two separate declarations are completed. These can be signed by a current full STEP member, your employer or an independent professional.  I confirm that the details given in section 2 are correct.  i Full Name:	I recognise that if I breach any of STEP's rules, disciplinary action may be taken against me which may result in the suspension or exclusion of my STEP membership and/or the imposition of a fine. I confirm that I am not aware of any criminal or regulatory proceedings being brought against me and that I will notify STEP should I become the subject of any criminal, disciplinary or other matters not already brought to the attention of the Professional Standards team. I understand that I cannot resign or lapse my STEP membership whilst an investigation is ongoing
Telephone:  STEP Membership Number (if applicable):	under the STEP Disciplinary Rules and that regardless of any such resignation and/or lapse, that STEP are entitled to investigate any complaints and make a determination.
Firm/Company:	I understand that as a STEP Member, I am represented by STEP throughout the world. In addition, my local STEP region and branch provide further support, benefits and services.
Signature:  Date:  Date:	I agree to adhere to meet STEP's CPD requirements and record my CPD activities. Full details can be found at www.step.org/cpd
ii Full Name:  Telephone:  STEP Membership Number	Although it is not a requirement of membership of STEP to have professional indemnity cover, I shall ensure that where appropriate, acting in the best interests of the client, I will have professional indemnity cover appropriate for the work being undertaken.  Note: Retired members using the 'Retired TEP' designation are confirming that they remain retired from working in trusts
(if applicable):  Firm/Company:	and estates.
Signature:	Signature:
Date:	Date:
	Date.

## STEP Membership Application Form



To be completed by Branch/Chapter only				
For completion by Branch or Chapter Chair/Secretary (delete as appropriate)				
I confirm that this applicant has/has not (delete as appropriate) been recommended for approval at Branch/Chapter level and has completed this form fully.				
Name:	Branch/Chapter:			
Signature:	Date:	D D M M Y Y Y		
7. Data Protection				

The information you provide will be used by the Society, its subsidiary companies, STEP branches/chapters or approved agents for administrative and membership purposes or as required by law. We will use your information to keep you up-to-date with news and developments in the industry, via both email and post. Our News Digest emails provide you with an overview of current news articles and reports relevant to your practice and the STEP Journal provides news, trends and issues facing trust and estate practitioners; industry debate, incisive comment and thoughtful analysis; legislative developments and implications; technical briefings and taxation updates; book and product reviews; and listings of Society meetings and events for the months ahead.

We do not sell lists of our members, but may pass your details on to local STEP branches/chapters acting on STEP's behalf as well as third parties with whom STEP works closely, for example our education partners. These companies may be based worldwide. This enables them to send you information about products and services that are relevant to your membership and are approved by STEP.

Please note that by submitting this application form, you will be indicating your consent to receiving such messages by email, SMS and/or post from STEP, local STEP branches/chapters and other third parties approved by STEP. If you do not want to receive this kind of information from STEP and/or third parties, please let us know by ticking the relevant box opposite.

The Society also produces lists of STEP members for issue to the public (i.e. the STEP Directory & Yearbook and Online Directory). These lists appear on the public area of the STEP website. If you do not wish your contact details to appear on these lists please tick the relevant box below.

I do not wish to receive mailing	ngs from STEP (please note that this
includes the STEP lournal).	

I do not wish to receive emails from STEP (please note that this includes all STEP email newsletters).

I do not wish to receive SMS messages from STEP (please note that STEP will not charge you for any SMS messages sent to you).

I do not wish to receive mailings (including emails) from third parties approved by STEP relating to products and services that are relevant to my membership.

I do not wish to have my contact details appear on lists of STEP members that are issued to the public or appear on the public area of the STEP website.

STEP members can update their email and mailing preferences at any time by logging into the STEP website.

If you would like further information on how STEP uses your personal information please refer to our Privacy Policy which can be found on our website, or contact us at <a href="mailto:step@step.org">step.org</a>

All membership application forms must initially be sent to your local branch or chapter. They will then forward your application to the STEP Membership Department.

Your local Branch/Chapter Secretary's details can be found on the STEP website at www.step.org/branches-chapters

## STEP Membership Application Form



8. How did you hear about STEP?				
Please select one of the follow	ving or detail below:			
Colleague/Employer STEP member STEP Journal STEP branch/chapter	STEP email STEP website Employer Partnership Programme	□ STEP conference or event           □ CLT International             □ Industry publication (please specify)           □ Other (please specify)		
9. Practice Areas				
Please select the practice are tailor its products and service		nt role. This in	nformation will be used in the	Online Directory and will help STEP
Charity formation/administr	ation		Family office	
Civil-law planning (incl found	dations)		Insurance	
Company formation/manage	ement		Investment	
Compliance/regulation			Philanthropy	
Contentious trusts and estate	es		Private banking	
Cross-border estates			Rural family, business and ag	griculture
Dispute resolution			Tax	
Elderly and vulnerable clients	S		Trust planning/administrati	on
Estate planning/administration	ion		Wills and probate	
Family business				
10. Practice Focus				
Please select the focuses that Practice Areas.	t relate to the Practice Areas sel	ected above.	Please note that it will be assu	med that all focuses will relate to all
Civil Law	Common Law			
Cross-Border	Domestic/Local			
International				
11. Profession				
Please select from the followi	ing information which will be us	sed in the Onl	ine Directory and STEP Directo	ory and Yearbook.
Academic	Estate Planner		Lawyer: Solicitor/Atto	
Accountant	Financial Planner		Legal Assistant/Parale	egal Wealth Manager Will Writer
Banker Barrister	☐ Insurance Adviso☐ Judge	or	☐ Notary ☐ Tax Advisor	will writer
Compliance Officer/Mana		/Advocate	Trustee/Fiduciary	
12. Firm Type				
	ing information which will be us	sed in the Onl	ine Directory.	
Academic Institution		Cha	•	Legal
Accountant	(400)	_	sultant	Tax Advisors
Alternative Business Structure  Bank/Private Bank	cture (ABS)		nily Office ancial Advisors	<ul><li>Trust Company</li><li>Wealth Management</li></ul>
Chambers			urance	Will Writing