



Boutique Financial Planning Principals Group Inc.
The Secretary
PO Box 80, GRANGE QLD 4051
Phone: 0412 770 442 Email: claudesantucci@y7mail.com

MEMBERSHIP APPLICATION

Name of Applicant: [text box]
AFS Licensee name for Ordinary or Associate, Individual name for Affiliate and Retired

Class of Membership: [checkbox] Ordinary [checkbox] Associate [checkbox] Affiliate [checkbox] Retired

Full Business Name: [text box] Date Established: [text box]

Business Address: [text box]
[text box] State: [text box] Postcode: [text box]

Primary Contact: [text box]
Phone: [text box] Fax: [text box] Mobile: [text box]
Email: [text box]

Second Contact: [text box] Email: [text box]

Third Contact: [text box] Email: [text box]

FPA Membership Details:
Name of AFS Licensee Principal (or controlling individual) who is a Member of FPA
Name: [text box] FPA Member No: [text box] [checkbox] CFP [checkbox] AFP

Ordinary Member Application:
AFS Licence Number: [text box]
Total number of representatives: [text box]

Associate Member Application:
AFS Licensee: [text box]
AFS Licence Number: [text box]
Estimated Date for your AFSL: [text box]

Has your business or any of the Directors of your business ever:
Been the subject of a complaint to ASIC? [checkbox] Yes [checkbox] No
Been the subject of any enforceable undertaking to ASIC? [checkbox] Yes [checkbox] No
Been subject to disciplinary action by the FPA? [checkbox] Yes [checkbox] No
Been subject to disciplinary action by any other professional or regulatory body? [checkbox] Yes [checkbox] No
Had a ruling or determination made against them by FOS or a court? [checkbox] Yes [checkbox] No
Made a claim on your Professional Indemnity Insurance? [checkbox] Yes [checkbox] No
Are you subject to any legal proceedings or are you aware of any pending action? [checkbox] Yes [checkbox] No

If the answer to any of the above questions is "yes", please attach written details.

ANNUAL MEMBERSHIP FEES 2013:
Membership fees cover the period 1st July to 30th June. The first year payment is the full amount set out in this table. The second year fees are reduced by a credit, calculated on a pro-rata basis, for the period from 1st June to the date of membership.

Table with 4 columns: Ordinary (\$440), Associate (\$440), Affiliate (\$220), Retired (\$110)

Preferred payment method: By direct payment to: Macquarie Bank Limited, BSB 184-446 Account # 1203-54162
or by cheque to: Boutique Financial Planning Principals Group, P.O. Box 80, GRANGE QLD 4051w



APPLICATION FOR MEMBERSHIP (Continued)

Your signature on this Application form, binds the Applicant to the following terms:

- You agree to abide by the rules of the Boutique Financial Planning Principals Group.
- You agree that if any information on this Application form is incorrect your Application may be deemed invalid membership granted as a result of this Application may be forfeited.
- You give authority to the FPA, ASIC and FOS (or COSL) to provide details about the Applicant to the Boutique Financial Planning Principals Group prior to your becoming a member and for the duration of your membership and to enable such due diligence, you have signed the 'Authority to Release Information' set out below.
- The acceptance of any organisation or individual as a member is subject to the discretion of the BFPPG Management Committee (Executive) who have sole authority to accept, reject or defer any membership application. If an application is rejected, the Membership fee will be returned in full. If a decision regarding membership is delayed or deferred for more than 3 months after the date of the first Management Committee meeting which considers this application, the application will automatically lapse and the membership fee will be returned in full.
- You will not purport to represent the BFPPG in the media or other public forum, unless specifically authorised by the Executive.
- You understand that successful membership application does not mean automatic acceptance for coverage under BFPPG's Group PI policy.

Authority to Release Information to the Boutique Financial Planning Principals Group Inc.

I accept that as part of the due diligence process for membership, the BFPPG Executive Committee may need to obtain information relating to my proposed membership, directly from any or all of: the Financial Planning Association (FPA), the Australian Securities and Investments Commission (ASIC) and the Financial Ombudsman Service (FOS) or the Credit Ombudsman Service (COSL). This is their authority to disclose such information about me and/or my firm as the Boutique Financial Planning Principals Group Inc. may request. This Authority stands as a complete release to any and all of the above bodies.

Signature: _____ Date:

Name: Position:

On behalf of:

PRIVACY STATEMENT

The BFPPG Inc. respects your privacy. Information is requested when you are seeking membership of the BFPPG Inc. which is mainly limited to business information, but may include personal information. Any information you give us or is collected by us, will be kept confidential and held with the utmost care, and will not be sold, rented, loaned or otherwise disclosed and will not be used in ways that you have not consented to. Please note, however, that basic Member details (name and contact details, along with a link back to your own website) are published on the public pages of the BFPPG website unless you advise us otherwise.

Proposer: Second:

Date Application Received: Date Subscription Received:

Date Approved: Date Member Notified: