

**PLANNED GIVING COUNCIL OF INDIAN RIVER**  
**2024 Member Application**

New  Renewal

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Attached is my check made payable to the "Planned Giving Council of Indian River" for the local Council dues for New Members of:

**\$150** for first year dues received between January 1<sup>st</sup> and June 30<sup>th</sup>

**\$75.00** for first year dues received between July 1<sup>st</sup> and December 31<sup>st</sup>

Attached is my check made payable to the "Planned Giving Council of Indian River" for the local Council dues for Renewing Members of:

**\$150** for the calendar year 2024 (from January 1, 2024 thru December 31, 2024).

Please mail application and check to:

**Planned Giving Council of Indian River**  
**PO Box 644001**  
**Vero Beach, FL 32964-4001**

I certify that I have read and subscribe to the *Model Standards of Practice for the Charitable Gift Planner* (see separate download at [www.pgcir.org](http://www.pgcir.org)), and I accept the responsibility to abide by that code.

\_\_\_\_\_  
Signature (required)

\_\_\_\_\_  
Date of application

Membership is available to individuals only and is not transferable. Membership is effective for the calendar year in which dues are paid. Please retain a copy of the membership application for your records.

If you have any questions, please contact the local council president, **Todd Heckman at (772) 567-7970 x 102 or [todd@lrplans.com](mailto:todd@lrplans.com)**