

Recertification

Recertification Information

(please print or type)

Business Information

Prefix First Name Middle Name Last Name Suffix

Business Name Preferred Salutation

Street Address Ste# City State Zip

Business Phone Fax Cell Phone

 Business Email Address Primary ☐ Yes ☐ No Website

Home Information

Street Address Ste# City State Zip

Home Phone Cell Phone

Home Email Address Birth date MM/DD/YY

 Please send all mail to my: ☐ Business Address ☐ Home Address

Affirmation / Attestation

By submitting annual dues to retain my membership and/or my professional designation, I do hereby attest and affirm the following:

- ☐ 1. I will abide by the IARFC Code of Ethics;
- ☐ 2. I have completed the required amount of professional CE hours. I understand the evidence of this may be randomly requested by the IARFC;
- ☐ 3. I have not had any professional license, certificate, registration, or permit revoked or suspended, or been the subject of any order, decree, or sanction of a court, exchange, or regulatory agency.

(Note: If you cannot affirm and attest the above, documentation may be required.)

I affirm and attest that I have read and understand the above, that the information I have provided complete and accurate to the best of my knowledge and belief, and I further understand that my IARFC membership and/or designation may be revoked if I provided any false or incomplete information.

Signature of Applicant (required)

Date

Recommend a colleague for Membership

Full Name

Address

City State, Zip

Phone Email

Membership Type

Choose one

MRFC®/MRFC® with Association Membership

☐ **MRFC®**
Master Registered Financial Consultant

MRFC Recertification Fee: \$400

Apply Late fee if 60 days after renewal date: \$25

Sponsor to the:

National Financial Plan Competition:

Silver \$50, Gold \$100,

Platinum \$250, Diamond \$500

Total payment:

☐ **MRFC® with Association Membership**

MRFC Recertification Fee: \$400

Association Fee: \$100

Apply Late fee if 60 days after recertification date: \$25

Donate to the:

National Financial Plan Competition:

Silver \$50, Gold \$100,

Platinum \$250, Diamond \$500

Total payment:

Payment Options

1. Mail payment to: IARFC

P.O. Box 506, Middletown, OH 45042

2. Fax to:

(513) 345-9479 (credit card only)

3. Email to: info@iarfc.org

Check payable to: IARFC

Credit Card: Visa, MC, Amex, or Discover

Credit Card#

Ex. Date. Security Code

Signature