



FINANCIAL SERVICES INSTITUTE

VOICE OF INDEPENDENT
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FINANCIAL ADVISOR MEMBERSHIP APPLICATION

☐ **YES! I want to join FSI**

CONTACT INFORMATION

Name _____ Designation _____ CRD # _____

Title _____ Broker-Dealer Affiliation _____

Mailing Address _____

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INDIVIDUAL MEMBERSHIP DUES

☐ **\$199 annually**

PAYMENT

By Fax: 202-664-5111

By Mail: Financial Services Institute
1201 Pennsylvania Ave. NW, Suite 700
Washington, D.C. 20004

By Email: membership@financialservices.org

☐ AmEx ☐ VISA ☐ MasterCard ☐ Check Enclosed

Credit Card Number _____ Expiration Date _____ Security Code _____

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Make check payable to: Financial Services Institute, Inc.

In accordance with the IRC SEC 6003, 100% of membership dues is estimated for lobbying, and is not deductible. FSI membership dues may not be deducted as a business expense or a charitable contribution.