

# PLAN

## *New Member Application*

**Name and Address of BGA:** \_\_\_\_\_

**Name of Principal:** \_\_\_\_\_

**Name of Person Completing Information:** \_\_\_\_\_

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

**Marketing Group Affiliation:** \_\_\_\_\_

- 1) How many POS personnel do you currently have working in your firm? Are they employees? If not, please explain.

\_\_\_\_\_

- 2) If you plan to hire additional or new POS personnel for the wires, please estimate how many and timing.

\_\_\_\_\_

- 3) What territory do your POS currently cover? Do you have plans to expand, please explain.

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- 4) Which wirehouses does your firm currently work in? Are your relationships direct or do you access a firm through another BGA relationship? Which wires you are currently trying to get in to and/or want to get in to?

\_\_\_\_\_

- 5) For full year 2015 and year-to-date 2016, how much target life premium did your firm produce in any wirehouse relationship that you have - please share the premium for each of your relationships. How much do you anticipate for full year 2016?

\_\_\_\_\_

- 6) If significant growth over 2015, what is your growth plan?

\_\_\_\_\_

- 7) Do you see the wirehouse channel as a significant growth opportunity for your firm? Why?

\_\_\_\_\_

- 8) Why are you interested in joining PLAN?

\_\_\_\_\_

- 9) Please provide any additional information.

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Please return completed form to Carol Rando at [carolrando@planlifeadvisors.org](mailto:carolrando@planlifeadvisors.org).