

## Join the Professional Advisors Group!

I wish to join the Professional Advisors Group of The Catholic Foundation. I understand the objectives of this group include:

- To provide members with a greater understanding of the role of The Catholic Foundation
- To provide venues where professionals receive pertinent educational and networking opportunities
- To offer professional expertise to individuals who are considering a charitable gift
- To support educational efforts regarding estate and gift planning throughout the Diocese of Columbus

## As a member, I understand that my role includes:

**Contact Information** 

- To work with sub-committees to plan and implement the objectives of the group
- To serve as a resource to donors, parishes, constituent organizations and Foundation staff
- To participate in quarterly meetings and the Annual John L. Sauter Estate Planning Seminar

Name	
	Title
	City/State/Zip
Phone	Fax
Professional Informatio	n
□Accountant □Atto	e following professions and am involved in the financial/estate planning field: orney
the governing body of my	profession.
Associations	
Parish/Church/House of V	Vorship:
Membership Level: □Regu	ılar Member (No Dues)
Sustaining Member Dues	(\$100): □Check enclosed □Bill my credit card (Visa/MC/Discover) □Invoice me
Credit Card Type	16-Digit Card #
	Name on Card
	Date
Dloaco mail	amail or fay this form to: The Catholic Foundation, Attn: James Anzelmo

Please mail, email or fax this form to: The Catholic Foundation, Attn: James Anzelmo, 257 East Broad Street, Columbus, Ohio 43215

JAnzelmo@catholic-foundation.org, Phone: 614-443-8893 Fax: 614-443-8894

Vocations Social Services Catholic Education Parish Life