



# New Economic Order Planning Association Individual Savers Membership Application

**I wish to become a member of the  
New Economic Order Planning Association.**

**Name:** First Name Initial Last Name

**Home Address:** Street City State Zip code

**Office Address:** Street City State Zip code

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

**Cell Phone:** \_\_\_\_\_ **Office Phone:** \_\_\_\_\_

**Send Membership information** and other materials to (Circle Choice): **Home Address** **Office Address**

**Membership Qualification Requirement:** (age 55-74) \$20,000, or more, of savings allocations to bank CDs, or risk of principal stocks and/or mutual funds.

**Individual Savers Membership:** First Year: **\$175** Renewal: **\$85 per year**

**Make check payable to** the third-party administrator for the Doctors Economic Research Association: **ASK Consulting, LLC.** Send to **Address: 1820 Avenida del Mundo #1603, Coronado CA 92118**

Circle **credit card.** Write **credit card numbers** in boxes. Add **expiration date, security code** and **billing zip code.**

**Payment Method:** **VISA** **Master Card** **American Express** **Discover**

**Card #:**

**Expiration Date:** \_\_\_\_\_ **Security Code:**

**Billing Zip Code:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_