

WILSON LAW PLC MAINTENANCE PLAN PRO-RATED MEMBERSHIP AGREEMENT

SECTION A

Please choose one of the following:

_____ I wish to participate in 2019-2020 Client Maintenance Program.

(Your Membership will run for 10 months: November 1, 2019, through August 31, 2020.) **If you chose this option, welcome to the program! Please complete the rest of the form and remit with payment as well as your Name and Fiduciary Summary, with or without changes.**

_____ **I do not wish to participate at this time.** (I understand that I will be billed at \$400/hr for any legal questions and services, and that this amount will be billed in 15 minute increments.)

***Please print your name here and return this form to us so that we can note your intention. Thank you.**

Name: _____

***Please provide your email address. All invitations to our maintenance members will be sent electronically. If you do not have an email address, please let us know.**

Email Address: _____

SECTION B

Please sign me up for the following plan (*choice based on the kind of estate plan you have*):

Yearly Rate	Plan Type
_____ \$329.16 (<i>Regularly \$395</i>)	Single Plan (For single people)
_____ \$412.50 (<i>Regularly \$495</i>)	Joint Married Plan (For married people w/joint plans - 1 Trust Book); or
_____ \$495.93 (<i>Regularly \$595</i>)	Married Separate Plan (For married people w/separate plans - 2 Trust Books).

SECTION C

Please choose one of the following: **(We schedule appointments 3 weeks from the date we receive your changes.)**

_____ I have enclosed my revised Names and Fiduciary Summary. Please call me to schedule my appointment to update my Powers of Attorney, and any other changes noted.

_____ I have no changes to my Names and Fiduciary Summary at this time. Please call me to schedule my appointment to update my Powers of Attorney. I will notify you later in the year if I have changes.

SECTION D

Please sign as indicated and return by November 1, 2018 (Only sign this section if you are joining):

By signing below, I/We retain Wilson Law, PLC to prepare the work indicated above and agree to pay the fees quoted above (Section B).

Client Signature

Client Signature

Date

SECTION E

Checklist:

- (1) Please return this Maintenance Program Agreement, whether or not you enroll;
- (2) Name and Fiduciary Summary and list of any changes, if any; and
- (3) The enrollment fee.

****Note that we accept payment by cash, check, or credit card (Master Card, Visa or Discover).
Please make checks payable to "Wilson Law, PLC."***