

LEGACY CIRCLE MEMBERSHIP FORM

Welcome to **Legacy Circle**, a society that recognizes those who have included [affiliate_name] in their long-term plans through a bequest provision in their will or trust, a life-income gift, or other deferred gift.

Name _____ Date of Birth ____/____/____

Name _____ Date of Birth ____/____/____

Address _____

Phone _____ Email Address _____

I/WE HAVE INCLUDED [affiliate_name] IN MY/OUR WILL:

- ☐ A specific bequest of \$ _____
- ☐ A percentage bequest of ____%. Estimated value \$ _____
- ☐ Other (describe): _____

I/WE HAVE MADE ARRANGEMENTS FOR THE FOLLOWING:

- ☐ A life insurance policy.
Death benefit \$ _____. Current cash surrender value \$ _____
[affiliate_name] is ☐ Primary beneficiary or ☐ Secondary beneficiary
- ☐ A Qualified Retirement Plan (IRA, 401k, 403b)
[affiliate_name] interest ____%. Current market value of plan \$ _____
[affiliate_name] is ☐ Primary beneficiary or ☐ Secondary beneficiary
- ☐ Charitable Gift Annuity
- ☐ Charitable IRA Rollover Contribution / Required Minimum Distribution
- ☐ Other (describe): _____

PURPOSE

My/our future gift is:

- ☐ Unrestricted or ☐ Restricted for the following purpose: _____

AUTHORIZATION FOR USE OF NAME

☐ I/we authorize [affiliate_name] to include my/our name(s) on the membership list of **Legacy Circle** in publications and on public recognition displays. I/we understand that this authorization is limited to the use of my/our name(s) only and that the type and amount of my/our gift will remain confidential.

Please list my/our names exactly as follows:

☐ I/we prefer to remain an anonymous member of **Legacy Circle**.

Signature

Date

Signature

Date

SHARE YOUR HABITAT STORY

Please tell us why you've chosen to make a planned gift to [affiliate_name].

May we inspire others by sharing your story in our print/electronic media? ☐ Yes ☐ No

Don't hesitate to contact [contact_name], [contact_title], at [phone_number], ext. [extension], or [email_address] if you have any questions or need additional information. Completed forms may be sent to [contact_first_name]'s attention at the affiliate address.

Thank you!

All information on this form has been provided for planning purposes only. [affiliate_name] acknowledges that the donor is not bound by any statements herein, and may choose to add, subtract, or revoke these arrangements at any time, at the donor's sole discretion.