A black background with white text

Description automatically generated

Insert logo, address, etc.

***Insert Name of Organization***

***Legacy Circle Gift Pledge Form***

This form recognizes my/our intent to support Insert Name of Organization by leaving a legacy gift through a:

❏ Will ❏ Living Trust ❏ Retirement Plan Assets ❏ Life Insurance Policy

❏ Other

For Name of Organization's long-term purposes only, I/we estimate today’s current value of the gift to be approximately $ .

# Note: Providing this amount is optional.

I/we understand that my/our estate is not legally bound by this statement, and we may choose to add, subtract, or revoke this bequest at any time, at our sole discretion.

# Note: Name of Congregation would greatly appreciate your updating us of any future changes.

❏ I/we agree to have our name(s) included on lists of legacy donors as motivation for others to make legacy gifts**.**

# Note: The amount of your gift will not be published and will remain confidential.

❏ Do not include my/our name(s) on list of legacy donors.

Name Address City State Zip Phone Email Donor Signature Date of birth Today’s date

Name Address City State Zip Phone Email Donor Signature Date of birth Today’s date

*Information you may need for your documents: Our legal name:*

*Employer Identification Number (“EIN”):*