

Wenatchee Rotary Foundation

Legacy Society Membership Form



Name(s) _____ Address _____

Primary Phone _____ Alternate Phone _____

Birthdate (optional) _____ Email _____

I have made or intend to make a legacy gift to the "**Wenatchee Rotary Foundation**" as indicated below:

- _____ Will (Please designate: **Wenatchee Rotary Foundation**)
- _____ Life Insurance Policy or Retirement Plan Beneficiary Designation
- _____ Trust in which Wenatchee Rotary Foundation is named as beneficiary. Please indicate when the Foundation's interest will take affect. (Example: "Income to my spouse, then principal to Wenatchee Rotary Foundation")
- _____ Deferred Gift (i.e. Charitable Gift Annuity, Pooled Income Fund, Charitable Remainder Trust, Charitable Lead Trust, etc.) Please contact the WRF President to discuss.
- _____ Other (description) _____

Estimated amount of gift: \$ _____ or _____ % of estate, policy or account.

Optional: Please enclose a copy of the pertinent section of your document mentioning Wenatchee Rotary Foundation as a beneficiary. We will retain this in our confidential files as a record of your intention.

Congratulations! Your gift qualifies you for membership in our Legacy Society. We are honored to recognize you in our Legacy Society material unless you indicate otherwise.

_____ Please list my/our names as follows: _____

_____ I / we wish to remain anonymous _____

Name Signature Date

Name Signature Date