

# 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