

# LETTER OF INTENT



## Planned Giving/Legacy Circle Commitment Form

I/We wish to be recognized with membership in the Legacy Circle to ensure the continued advancement of the Academy of the Holy Cross mission.

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ EMAIL: \_\_\_\_\_

All information indicated below is considered confidential and is only used to track current and potential legacy and planned gifts to the Academy of the Holy Cross.

I/We have provided for the future of Holy Cross in the following manner:

Bequest through will or trust	Gift of Life Insurance
Charitable gift annuity	Bequest of retirement plan assets
Charitable remainder trust	Remainder interest in residence or farm
Charitable lead trust	Other: _____

Please find attached a copy of the page or paragraph from the will or trust bequest, beneficiary designation form for life insurance, charitable trust, beneficiary designation form for retirement plan, or other gift plan that describes my gift provision.

The estimated current dollar value of my gift is \$\_\_\_\_\_.

Note: A dollar value of your planned gift will be credited to you for cumulative gift recognition.

Please list my name (and/or my spouse's name) for the Legacy Circle in the following manner:

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

You have my/our permission to include my/our name(s) in published lists (publications, newsletters, donor recognition plaque, and website) recognizing Legacy Circle members. \_\_\_\_\_ (Initial)