



**BOYS & GIRLS CLUBS**  
OF MERCER COUNTY

## **Boys & Girls Clubs of Mercer County Legacy Society**

### **CONFIDENTIAL ENROLLMENT FORM**

In consideration of the impact that Boys & Girls Clubs of Mercer County has on the lives of young people, I/we have made provision for a gift to the Club in my/our estate plan. Understanding that the Club Trustees have established The Legacy Society to recognize individuals who made such a commitment, I/we are pleased to authorize the Club to include me/us as a member of The Legacy Society.

**Please print or type**

Title \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Name for recognition purposes** \_\_\_\_\_

**Relationships with Boys & Girls Clubs**

- |   |   |                                      |
|---|---|--------------------------------------|
| <input type="checkbox"/> Board of Directors (current or past) | <input type="checkbox"/> Parent/Grandparent | <input type="checkbox"/> Volunteer   |
| <input type="checkbox"/> Alumnus                              | <input type="checkbox"/> Friend             | <input type="checkbox"/> Other _____ |
|   | <input type="checkbox"/> Staff              |                                      |

**Gift Information**

**I/we qualify for The Legacy Society through the following planned gift:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Bequest (or Living Trust) | <input type="checkbox"/> Charitable Remainder Annuity Trust | <input type="checkbox"/> IRA/Retirement Plan Beneficiary                     |
| <input type="checkbox"/> Dollar amount             | <input type="checkbox"/> Charitable Remainder Unitrust      | <input type="checkbox"/> Gift of Residence or Farm with Retained Life Estate |
| <input type="checkbox"/> Stock or property         | <input type="checkbox"/> Deferred Charitable Gift Annuity   | <input type="checkbox"/> Charitable Lead Trust                               |
| <input type="checkbox"/> Percentage bequest        |   | <input type="checkbox"/> Life Insurance Policy                               |
| <input type="checkbox"/> Residuary bequest         |   |  |
| <input type="checkbox"/> Charitable Gift Annuity   |   |  |
| <input type="checkbox"/> To be determined          |   |  |

**Please indicate the approximate current market value of the planned gift named above:**  
\$ \_\_\_\_\_ (Will be treated as confidential.)

**The gift is:**

- Unrestricted      Restricted as follows: \_\_\_\_\_
- I/ we wish to remain an anonymous member of The Legacy Society.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_