



**National Association of Charitable Gift Planners**  
**Legacy Circle**

*\*Confidential Membership Acceptance Form\**

*Thank you for informing us of your generous commitment to the National Association of Charitable Gift Planners through your estate plans. These gifts provide critical philanthropic support for advocacy, access, and education—all of which support the many causes that improve where we live and work.*

I/we wish to be recognized with membership in the Legacy Circle and would like to join with other members to ensure the continued growth of the National Association of Charitable Gift Planners.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

I have provided for the future of the National Association of Charitable Gift Planners in the following manner:

- |  |  |
|--|--|
| <input type="checkbox"/> Bequest through will or trust | <input type="checkbox"/> Life insurance                    |
| <input type="checkbox"/> Charitable remainder trust    | <input type="checkbox"/> Bequest of retirement plan assets |
| <input type="checkbox"/> Charitable lead trust         | <input type="checkbox"/> IRA distribution                  |
| <input type="checkbox"/> Real estate                   | <input type="checkbox"/> Other _____                       |

Attached find a copy of the page or paragraph that describes my future gift provision.

My gift is to be used as follows: \_\_\_\_\_

Please list me (and/or my spouse, or company, or ...) in all CGP Legacy Circle listings

as: \_\_\_\_\_

You have my permission to include my name in published lists (publications, newsletters, website) recognizing Legacy Circle members.

You have my permission to use my name in internal and external published articles describing my gift and its positive impact on the future of the National Association of Charitable Gift Planners.

I prefer that you do not include my name in published lists recognizing the Legacy Circle members. Please consider me an anonymous donor.

I prefer that you do not include my name or use information about my gift in any internal or external publications.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Date of birth

Gift should be directed to:  
National Association of Charitable Gift Planners  
200 South Meridian St. Suite 510  
Indianapolis, IN 46225  
EIN: 351796186