

**Please fill out this form so we may welcome you into the YGW Legacy Society:**

## **Member Profile Form**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip, Country: \_\_\_\_\_

Preferred contact method: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

**Please choose one:**

YGW may include my (and, if applicable, my spouse's) name in the YGW Legacy Society listings. (Neither amount nor designation, if provided, will be included on the listing.)

I am honored to be included in the YGW Legacy Society; however, I prefer to remain anonymous. Please do not include my/our name in the YGW Legacy Society listings.

**Please tell us, in confidence, more about your estate provision for the Yeshiva of Greater Washington. The following information is optional.**

I have named YGW as a beneficiary of my:

Will/Trust

IRA or Retirement Plan

Life Insurance Policy

Charitable Remainder Trust

Other (please specify): \_\_\_\_\_

This provision is stated as a: \_\_\_\_\_ Specific dollar amount (\$): \_\_\_\_\_ or a

Percentage of estate/account (%): \_\_\_\_\_ If based on a percentage, please estimate the current value of the gift to YGW (\$): \_\_\_\_\_

My gift is:  Unrestricted (General Operations) or  Designated for \_\_\_\_\_