



LEGACY CIRCLE ENROLLMENT FORM

Full Name: _____ Birthdate: _____

Spouse's Name: _____ Birthdate: _____

Address: _____ Phone: _____

City/State/ZIP: _____ Email: _____

- I/We wish to be recognized as members of Seattle Audubon **Legacy Circle**.
 I/We wish to remain anonymous.

I/We have provided for the future of the Seattle Audubon Society in the following manner:

- | | |
|--|--|
| <input type="checkbox"/> Bequest through will or trust | <input type="checkbox"/> Remainder interest in residence |
| <input type="checkbox"/> Charitable remainder trust | <input type="checkbox"/> Other |
| <input type="checkbox"/> Gift of life insurance | o Describe: _____ |
| <input type="checkbox"/> Bequest of retirement plan assets | |

The estimated current value of my/our legacy gift is \$_____.

- My/Our gift is **unrestricted**, to be used by Seattle Audubon to further the work of all its current and future programs.
 My/Our gift is **restricted**, to be used as follows: _____

Donor Signature(s): _____

Date: _____

Any attachments or other letters further describing the details of the above provision(s) are welcome, such as the section of the will or trust in which Seattle Audubon is named.

Questions? Contact Development Director Carol Roll by phone at (206) 523-8243 ext. 116 or via email at carolr@seattleaudubon.org