



## *Legacy Society* Enrollment Letter

I want to provide a gift for the community by including The Community Foundation of Shelby County in my estate plan. Please enroll the name(s) listed at the bottom of this letter in the Legacy Society of The Community Foundation of Shelby County.

I understand that the gift must adhere to the Gift Acceptance and Fund Acceptance policies of The Community Foundation in effect at the time the gift is received by the Foundation. The Community Foundation will make every effort to use the gift as I direct, but should that direction be impossible or unnecessary, the Foundation will use its variance power to enable my gift to support a closely related cause or organization.

I understand that I should seek the advice of my financial or estate planning advisor regarding the gift to The Community Foundation.

By submitting this document, I will become a member of the Foundation's Legacy Society. For publication purposes, I ask the following:

\_\_\_\_\_ I give permission to use the name(s) as listed below.

\_\_\_\_\_ I wish to remain anonymous, but the information provided is for your internal use.

Name: \_\_\_\_\_ Date of Birth (year optional) \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Received by the Community Foundation of Shelby County by: \_\_\_\_\_ Date: \_\_\_\_\_

Marian Spicer, Executive Director