



## Confidential Gift Intention Form

Dear Donor,

We realize that many people who plan to support The Encore Musical Theatre Company through their estate and/or financial plans prefer to keep their intentions private. However, by letting us know of your plans, we can thank you during your life and confirm that we are able to fulfill your stated intentions.

Please know that completing this form is non-binding. We understand that you may change your plans at any time. Please also know that all information you share with us is kept strictly confidential.

### Planned Gift Notification – Confidential

#### Personal Information

Donor Name: \_\_\_\_\_.

Spouse Name: \_\_\_\_\_.

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_.

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

#### Your Gift Intention

Please indicate your planned gift(s) below. *Optional: Please provide information noted in italics.*

\_\_\_\_\_. Bequest in my/our will or living trust (*percent or dollar amount*): \_\_\_\_\_.

\_\_\_\_\_. Retirement Plan Beneficiary (*primary/contingent/percent*): \_\_\_\_\_.

\_\_\_\_\_. Life Insurance Plan Beneficiary (*primary/contingent/percent*): \_\_\_\_\_.

\_\_\_\_\_. Donor Advised Fund or Endowment (*name of provider*): \_\_\_\_\_.

\_\_\_\_\_. Other (*annuity, real estate, land, family foundation, securities*): \_\_\_\_\_.

Estimated value of your planned gift: \_\_\_\_\_.

Name and phone number of Attorney or Financial Advisor (*optional*): \_\_\_\_\_.

Please add any details you wish to share: \_\_\_\_\_.

\_\_\_\_\_.

\_\_\_\_\_.

### Sample Bequest Language

"I hereby bequeath to The Encore Musical Theatre Company of Dexter, Michigan the sum of \$\_\_\_\_\_ (or \_\_\_\_\_%) of my estate.

### Heritage Circle Society

Our Heritage Circle Society honors those who have made a planned charitable gift to The Encore Musical Theatre Company. Recognition includes invitations to special events and inclusion in listings of planned gift donors.

\_\_\_\_\_. Yes, you may include me/us in listings of planned gift donors.

Please let us know exactly how you would like your name(s) to appear in our listings. (*Please note the amount of your intended gift will not be published*):

Name(s): \_\_\_\_\_.

\_\_\_\_\_. No, I/we prefer not to be included in listings.

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

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



#### **Please return this completed form to:**

The Encore Musical Theatre Company  
Attn: Cheryl Willoughby, Gift and Donor Relations  
7714 Ann Arbor Street | Dexter, MI 48130-1322  
Email: [cheryl@theencoretheatre.org](mailto:cheryl@theencoretheatre.org)