



# WATERFORD COUNTRY SCHOOL

## WATERFORD COUNTRY SCHOOL LEGACY SOCIETY

### CONFIDENTIAL STATEMENT OF LEGACY GIFT

#### LEGACY GIFT CONFIRMATION

If you have made a legacy gift to the Waterford Country School, please take a moment to complete the form below and return it to us. Legacy donors who have remembered the Agency with a life income gift or have named Waterford Country School as a beneficiary of a will, trust, retirement plan, or life insurance policy are recognized members of the Legacy Society.

Name: \_\_\_\_\_ Is this a joint gift? (Y/N) \_\_\_\_\_

Spouse: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

I/We have named Waterford Country School as a beneficiary in one or more:  
(check all that apply)

\_\_\_ Will or Living Trust \_\_\_\_\_ specify amount or \_\_\_\_\_ %

\_\_\_ IRA, pension, 401(K), 403(b) or other retirement account

\_\_\_ Life Insurance Policy

\_\_\_ Charitable Trust(s)

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

\_\_\_\_\_ Gift Value (or best estimate)

Comments: \_\_\_\_\_

Please enroll me/us as a member of the Waterford Country School Legacy Society

\_\_\_ I/We may be included in a list of Society members in WCS publications

\_\_\_ I/We prefer to remain anonymous but will accept other benefits of membership

While this form is not a binding agreement or pledge, it simply permits us to acknowledge your estimated gift, recognize you for this intention, and have the records for future use. The details of this form and any additional information you share with us will remain confidential.

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

