

The Mt. San Jacinto College Foundation Legacy Society Membership Form

I wish to advise you of my support through membership in the Legacy Society. Toward that end, the following form contains information for membership. I have named, or am in the process of naming, the Mt. San Jacinto College Foundation as a beneficiary of my:

- ☐ Will ☐ Living Trust ☐ Charitable Trust ☐ Gift Annuity
- ☐ Life Insurance ☐ Other Endowment _____
- ☐ In the interest of securing similar commitments for the Mt. San Jacinto College Foundation, you may list my name as a benefactor.
- ☐ Please do not list my name.

Name _____

Title _____

Organization/Firm _____

Address _____

City _____ State _____ Zip _____ Phone (____) _____

Date _____ Signature _____

It is understood that this in no way is considered an enforceable pledge, but merely to inform Mt. San Jacinto College Foundation of my intention. Gifts may be restricted or unrestricted.

- ☐ I cannot make a commitment at this time but will advise you when I am in a position to do so.

Please send me more information on:

- ☐ Becoming a member of the Legacy Society ☐ Including the Foundation in my will or trust
- ☐ Including the Foundation in an insurance policy ☐ Endowments
- ☐ Tax benefits of Planned Giving ☐ Gift Annuity
- ☐ Other _____

For more information, contact Gene Gibba, Gift Planning Consultant, (951) 487-3171

Please return this form to:

*Mt. San Jacinto College Foundation
1499 N. State Street
San Jacinto, Ca. 92544
(951) 487-3171*