

Cretin-Derham Hall

The Legacy Society

Name: _____

Home Address: _____

Home Phone: _____

Office Phone: _____

Email: _____

☐ I/We would like to be listed as a member of the CDH Legacy Society in the Cretin-Derham Hall Annual Report of Donors.

☐ I/We would prefer to remain anonymous.

Completion of this form is not intended to be, nor is it, legally binding. All information provided on this form is confidential.

Signature: _____

Date: _____



I/We accept the pleasure of membership in the Cretin-Derham Hall Legacy Society through the following planned gift commitment to benefit students at Cretin-Derham Hall:

- ☐ Will provision
- ☐ Gift annuity
- ☐ Charitable remainder trust
- ☐ Life insurance policy or other financial instrument with CDH as beneficiary
- ☐ Gift of a life estate in personal residence, farm or vacation property
- ☐ I/We have already remembered CDH in my/our will
- ☐ Please have a Development Office representative contact me/us

Optional:

- ☐ The estimated current value of my/our future gift to CDH is approximately \$_____ and is intended for:
- ☐ Wherever the need is greatest
The following specific need:_____

