

LEGACY SOCIETY

As evidence of my desire to provide a legacy of support to Holy Family Catholic School, I am pleased to inform you that I intend to leave a gift to Holy Family Catholic School in my estate plans. I understand that this commitment is revocable and can be modified by me at any time.

Names(s)					
Address			City	State	Zip
Phone	Fax	 E-mail(s)			
Birthdate(s) (MM/D	D/YEAR)				
It is my intent to lea	ave a legacy for the bene	fit of Holy Family Catho	olic School (Ple	ease check all tha	t apply).
□ I have planned a b	pequest of \$	of my estate to H	oly Family Cath	nolic School in my	/ will*.
☐ I have names Holy	/ Family Catholic School a	s the beneficiary of	_% of [□ the re	side of] my estate	2*.
	Living or Charitable Remains corpus of the trust, to			re \$, or% of
Please enroll me in	Holy Family Catholic Sch	ool's LEGACY SOCIETY	under the follo	owing conditions	:
•	ion to publish my name ir ure gifts to benefit Holy F		CIETY (print ar	nd internet) as a r	motivation for others
□ Do not publish my	y name as a member of LE	EGACY SOCIETY (except	on my person	alized certificate)	
Please PRINT exactly	y how you would like you	r name(s) to read on th	e line above		
Date	Donor Signature				

^{*}It is helpful to Holy Family Catholic School when you share supporting documentation that references Holy Family Catholic School specifically and/or provide approximate bequest amounts. Your cooperation allows LEGACY SOCIETY to engage in long-rage planning and some asset allocation. Any documentation provided will be kept in strict confidence and physically secured.