

LEGACY SOCIETY

Membership Form

The Legacy Society celebrates the commitment of thoughtful donors who have provided for the future of American Friends of Tel Aviv University in their estate plans, trusts, retirement plan designations, life income gifts, or other planned gift vehicle. With our gratitude, we welcome you into our growing circle of friends.

Name _____

Address _____

Phone number _____ Email _____

I/We wish to be referred to as _____

in any donor recognition materials. My date of birth is _____

Include my spouse/partner _____

as a member. My spouse/partner's date of birth is _____

I/We wish to remain anonymous and do not wish to be recognized publicly at this time.

Optional information to help us plan for the future:

I/We are pleased to acknowledge that I/we have named AFTAU as a beneficiary in my/our:

Will/Living Trust	Donor Advised Fund
Retirement Plan	Charitable Remainder Trust
Life Insurance Policy	Charitable Gift Annuity
Payable on Death Account	Other (please specify) _____

My/our gift is:

Unrestricted

Designated specifically for _____

Not yet determined. Please contact me to discuss options.

AFTAU will receive this gift (check all that apply):

Upon my death Upon the death of my spouse/partner Other _____

The estimated value of my/our gift is:

\$ _____ as a stated amount in my estate plan.

_____ % of my estate, currently valued at \$ _____ for AFTAU.

_____ % of my retirement plan/life insurance, currently valued at \$ _____ for AFTAU.

Signed _____ Date _____

Signed _____ Date _____

American Friends of Tel Aviv University recognizes that this gift is subject to change depending on personal economic circumstances. This form is not intended to be a legally binding pledge. Information you provide will remain confidential.

Please mail this Membership Form to Jennifer Young at American Friends of Tel Aviv University, 39 Broadway, Suite 1510, New York, NY 10006. For more information, please email jyoung@aftau.org or call direct 212-742-9049 (or 800-989-1198).