

THE COLLEGE OF
WOOSTER

Independent Minds, Working Together

I/we have made provisions in my/our estate planning for the benefit of The College of Wooster.

Name(s) *(please print)* _____

Class/Year (s) _____

Address _____

City, State, Zip _____

Telephone _____

E-mail _____

I/we have provided for the future of The College of Wooster in the following manner:

- | | | |
|---|---|---|
| <input type="checkbox"/> Provision in Will | <input type="checkbox"/> Beneficiary of Retirement Accounts | <input type="checkbox"/> Charitable Remainder Trust |
| <input type="checkbox"/> Provision in Trust | <input type="checkbox"/> Real Estate (Home, Farm, Business) | <input type="checkbox"/> Charitable Lead Trust |
| <input type="checkbox"/> Beneficiary of a Life Insurance Policy | <input type="checkbox"/> Charitable Gift Annuity | |
| <input type="checkbox"/> Other designation _____ | | |

The estimated current* value of my/our gift is \$ _____

* The College of Wooster recognizes that this value is an approximation and may change due to market and lifetime reasons.

I/we would prefer that my/our gift be used to: _____

- You have my/our permission to include my name(s) in publishing lists (publications, newsletters, Web site) recognizing 1866 Legacy Society members.

Please list me/us as _____

- I prefer that you do not include my/our name(s) in published lists recognizing 1866 Legacy Society members. Please consider me/us anonymous donor(s).

Signature (s) _____ Date _____

_____ Date _____

Please mail or fax completed form to:

The College of Wooster, Office of Development
1101 North Bever Street, Wooster, Ohio 44691

Fax: 330-263-2390

Web: pg.woosteralumni.org

Email: Planned Giving@Wooster.edu

The 1866 
Legacy Society
THE COLLEGE OF WOOSTER