



Legacy pARTner Enrollment Form

Welcome! If you have made plans or provisions for a future gift to the Art League of Ocean City, you are now our valued Legacy Partner. We are pleased to recognize your generous spirit!

Please complete this form and return to: PO Box 3503, Ocean City, MD 21843

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ EMAIL _____

PLEASE TELL US HOW YOU PREFER TO BE RECOGNIZED.

I/we authorize the Art League to list the following name(s) as Legacy Partners:

I/we have made provisions for a gift, but wish to remain anonymous at this time.

I/we am willing to share my legacy story for publication to help inspire others.

PLEASE DESCRIBE YOUR PLANNED GIFT TO THE ART LEAGUE OF OCEAN CITY.

Bequest through your will or revocable trust Beneficiary of a bank or brokerage account

Beneficiary of an IRA or qualified retirement plan Beneficiary of a life insurance policy

Charitable Remainder Trust - Revocable beneficiary

Charitable Remainder Trust - Irrevocable beneficiary

Please describe (or attach a copy of) the instructions found in your will or trust pertinent to this gift.

SIGNATURE

This statement of intent is nonbinding

DATE