



**THE FELLOWS LEGACY SOCIETY  
MEMBERSHIP FORM**

*Providing information about your bequest or estate gift to the Institute for Citizens & Scholars enables us to plan and administer your gift in accordance with your wishes. It is helpful, but not a requirement, for us to have on file any supporting documentation that you are willing to share with us. Such documentation might include a copy of the relevant pages of your will or trust, or your beneficiary designation form. Additionally, the Institute for Citizens & Scholars respectfully requests notification should you make changes or adjustments to your planned gift. Your information will be kept strictly confidential.*

**INFORMATION ABOUT YOUR PLANNED GIFT:**

I/We have named the Institute for Citizens & Scholars in my/our estate plan as follows:

- |  |   |
|--|---|
| <input type="checkbox"/> Will/Living Trust                 | <input type="checkbox"/> Charitable Lead Trust      |
| <input type="checkbox"/> IRA or Retirement Plan            | <input type="checkbox"/> Charitable Remainder Trust |
| <input type="checkbox"/> Life Insurance Policy             | <input type="checkbox"/> Other: _____               |
| <input type="checkbox"/> Beneficiary of Donor Advised Fund |   |

It is my/our desire that this gift be used:

- Where the need is greatest; or  
 To benefit the following program: \_\_\_\_\_

Present estimated value of gift: \_\_\_\_\_ as of \_\_\_\_\_  
(date)

**INFORMATION ON HOW WE SHOULD ACKNOWLEDGE YOUR GIFT**

- Feel free to publish my name (and/or my spouse's name) among the list of Fellows Legacy Society members to help inspire others to leave a future gift to benefit the organization. My name (and/or my spouse's name) should be listed

as: \_\_\_\_\_

- I/We would like this to be an anonymous gift.

By \_\_\_\_\_  
(signature) \_\_\_\_\_  
(date)

By \_\_\_\_\_  
(signature) \_\_\_\_\_  
(date)

Name: \_\_\_\_\_  
(print)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Birthday: \_\_\_\_\_

I understand that my estate is not legally bound by this intention and I may choose to add, subtract, or revoke it at any time at my sole discretion. Please return this form to: Steve Haddad, Development Office, Institute for Citizens & Scholars, 104 Carnegie Center, Suite 301, Princeton, NJ 08540 or by email to [haddad@cands.org](mailto:haddad@cands.org).