

Heritage Guild Enrollment Form

Please complete this form and send it back to us at: **Zoological Society of San Diego, Office of Gift Planning, P.O. Box 120551, San Diego, CA 92112-0551.**

I care about animals, want to help fight against extinction and play an integral role in helping leave a wildlife legacy for future generations. Because of this desire, I have included the Zoological Society of San Diego in my plans indicated below.

By sharing this gift decision with the Zoological Society, I am now a member of their Heritage Guild. I am joining an elite group of similarly committed people. I understand that the Zoological Society will keep this information in the strictest confidence unless I give permission to do otherwise.

Type of Provision:

- | | |
|--|---|
| <input type="checkbox"/> Bequest in Will or Living Trust | <input type="checkbox"/> Beneficiary of Life Insurance Policy |
| <input type="checkbox"/> Beneficiary of Charitable Remainder Trust | <input type="checkbox"/> Beneficiary of a Charitable Gift Annuity |
| <input type="checkbox"/> Beneficiary of Charitable Lead Trust | <input type="checkbox"/> Beneficiary of a Pooled Income Fund |
| <input type="checkbox"/> Beneficiary of Retirement Plan/IRA | <input type="checkbox"/> Other (please describe) |
-

Comments about my gift (intention, memorial, etc.):

Use of my name (please check one box):

- Yes, you may list my name as a member of the Heritage Guild in the newsletters or other publications. No mention of my specific gift will be made without first getting my written permission.
- No, I would rather be listed as Anonymous.

Why does Zoological Society of San Diego request for permission to list your name?

The Society wants to recognize those who make these wonderful gift decisions. In addition, people are influenced by what others do and are more likely to make similar gifts. By letting us list you as a member of the Heritage Guild, it encourages others to follow your lead.

My Information:

Name: _____ Home Phone: _____

(This is the name that will be used in official publications if authorized above.)

Address: _____ Alt. Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

In the case of revocable gifts, if I have restricted my gift or if a significant change in this/these provision(s) occurs in the future, I will notify the Zoological Society of San Diego, Office of Gift Planning at 619-744-3352.

Signature: _____ Date: _____

Signature: _____ Date: _____