



PROVIDENCE  
LEGACY SOCIETY

MEMBERSHIP FORM

By completing this form, you are inaugurated into the Providence Legacy Society and may enjoy all membership benefits in perpetuity.

I am pleased to provide a legacy of support to Providence Academy with an estate gift.

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Second name (if joint gift): \_\_\_\_\_ Date of birth: \_\_\_\_\_

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

Preferred phone: \_\_\_\_\_ Preferred email: \_\_\_\_\_

The primary source of this gift is a:

- Will or revocable trust
- Beneficiary designation for a retirement plan or insurance policy
- Charitable trust
- Donor advised fund recommendation
- Other property (please specify): \_\_\_\_\_

The approximate value of this gift as of today is: \$ \_\_\_\_\_

For purposes of public recognition of my gift, please list my/our name(s) as follows:

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**THIS FORM IS NOT A LEGAL DOCUMENT.** This form shall not create any obligation nor constitute a binding pledge. The gift described may be revoked, and no action has been taken in reliance on it. We appreciate any supporting documents you are willing to share confidentially.

Return completed form to: Josh Anderson, Director of Development  
Providence Academy | 15100 Schmidt Lake Road | Plymouth, MN 55446  
Josh.Anderson@providenceacademy.org | (763) 258-2531  
[www.providenceacademy.org/planned-giving](http://www.providenceacademy.org/planned-giving)