



MY PLANNED GIFT INTENTION

To inform you of my desire to provide a legacy gift to the Palm Springs Opera Guild (EIN #95-6220739), I hereby affirm my intent to leave a gift through my:

PLANNED GIVING METHOD

- | | |
|--|--|
| ☐ Will | ☐ Charitable Remainder Trust |
| ☐ Living Trust | ☐ Donor Advised Fund |
| ☐ Retirement Plan Asset | ☐ Stocks, Bonds, Bank Accounts |
| ☐ Life Insurance Policy or Annuity | ☐ Other (please specify): _____ |
| ☐ Annual Qualified Charitable Distributions from My IRA or Planned Annual Gift from My Donor Advised Fund | |

ADDITIONAL PLANNED GIVING INFORMATION

- ☐ I have already made a provision for planned giving through one or more of the methods checked above.
- ☐ I would like more information about programs offered by the Palm Springs Opera Guild.

We encourage all Legacy Society members to discuss the various planned giving options with their attorney or financial advisor to decide what is best for them and their family.

GIFT VALUE

As of the date signed below, the approximate value of my gift is \$ _____

Stating an amount does not legally bind your estate. You may choose to add, subtract, or revoke this bequest at any time, at your sole discretion.

If your gift is a percentage of your estate or of an asset, please indicate the percentage and approximate value here: _____ % = \$ _____

LEGACY SOCIETY RECOGNITION & GIFT DESIGNATION

RECOGNITION PREFERENCE

Please choose one of the following two options:

- ☐ I consent to the publication of my name as a member of the Palm Springs Opera Guild Legacy Society. I understand I may be acknowledged on the website, on a dedicated plaque displayed in the office, and in other promotional materials.
- ☐ I do not wish to have my name published on the website, on a dedicated plaque in the office, or in other promotional materials. I understand I will be identified as an anonymous member only but will still receive invitations to exclusive Legacy Society events.

GIFT DESIGNATION

If you would like to further direct your individual gift, please choose one of the following options:

- ☐ Please apply my gift to the Board Designated Endowment Fund to provide long-term funding for the Guild's mission.
 - ☐ Please apply my gift to fund a Career Grant for an emerging artist in need.
 - ☐ Please apply my gift to meet any immediate needs of the Guild as designated by the Board, including but not limited to operational expenses.
 - ☐ Please apply my gift according to the following restricted purpose: _____
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CONTACT INFORMATION & SIGNATURE

Please print your name as you would like it to appear in our Legacy Society Roll:

Address:

Street	City	State	Zip Code
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Phone: _____ **Email:** _____

Signature: _____

Today's Date: _____ **Your Date of Birth:** _____ (Optional)
Used for PSOG planning purposes only and not for publication.

Please return this completed form to: Palm Springs Opera Guild, PO Box 5022, Palm Springs, CA 92263. You may also scan and email it to **LegacySociety@psopera.org**.

Thank you for taking the time to let us know of your planned giving intentions. If you are a new member of the Palm Springs Opera Guild Legacy Society, welcome! If you are an existing member, thank you for your support and your patience as we collect this important information regarding you and your wishes.