



CONFIDENTIAL
Perennial Legacy Society
Membership Form

I am pleased to accept membership into the Perennial Legacy Society at Green Bay Botanical Garden (the Garden). I understand that my membership is based on the information that I have provided below.

To support the mission of the Garden, my/our estate plan provides for the Garden as follows:

(please select all that apply)

- There is a Legacy Gift in my/our will or trust to benefit the Garden. It includes:
 - a specific dollar amount
 - a percentage of my estate
 - the residue of my estate
- I have named the Garden as a beneficiary in my other estate provisions, (retirement plan, IRA, life insurance policy, other)
- I have named the Garden as a beneficiary of a:
 - Life Insurance Policy
 - Charitable Gift Annuity
 - Charitable Remainder Trust
 - Other

The approximate amount of my/our gift is _____

(Not required, however we would like to help you achieve your goals for GBBG and its future.)

The gift is to be used for:

- Garden Endowment Fund—preserves the principal of a donor's gift. Only the earnings from this fund may be spent as determined by the Garden Board of Directors.
- Education Endowment Fund—preserves the principal of a donor's gift. Only the earnings from this fund may be spent for Children & Family Programming as determined by the Garden Board of Directors.
- The Garden Investment Fund—enables the Garden Board of Directors to direct any amount of this fund for investment in the Garden's growth. Funds may be used for construction or development of new gardens or facilities, capital equipment needs, or general operations.

This gift is from: myself my spouse and me/partner and me

Name _____ Date of birth _____

Spouse's/Partner Name _____ Date of birth _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

By sharing your email address, you agree to receive email communications from Green Bay Botanical Garden. You may unsubscribe at any time.

- I/We would like others to be encouraged by my/our example, I/we hereby give permission for my/our name(s) to be published.
- I/We would be interested in sharing my/our legacy story in publications.
- I/We prefer to remain anonymous not to be listed in any the Garden publications or other recognition, but will accept other benefits of membership in the Perennial Legacy Society.

I/we understand that I/we am/are not making a legal or binding commitment upon my/our estate by submitting this Perennial Legacy Society Membership Form. If for any reason in the future the Garden is no longer included in my estate plan, I/we will notify you so that you can update your records and remove I/we from the Perennial Legacy Society.

Signature _____ Date _____

Signature _____ Date _____