

# Charitable Gift Annuity Application

Please complete this application form to establish your Charitable Gift Annuity. Once completed, please print, sign, and return this form to our development office.

## 1. Primary Annuitant / Donor Information

Full Name (First, Middle Initial, Last):

Date of Birth (MM/DD/YYYY):

Social Security Number / Tax ID:

Street Address:

City:

State / Province:

Zip / Postal Code:

Phone Number:

Email Address:

## 2. Joint or Successor Annuitant Information (If Applicable)

Relationship to Primary Donor (e.g., Spouse, Sibling):

Full Name (First, Middle Initial, Last):

Date of Birth (MM/DD/YYYY):

Social Security Number / Tax ID:

## 3. Gift and Annuity Details

Estimated Gift Amount (USD \$):

Asset Type (e.g., Cash, Publicly Traded Securities, Real Estate):

Annuity Type (Type "Immediate" or "Deferred"):

If Deferred, Targeted Start Date (MM/DD/YYYY):

Payment Frequency (Type "Quarterly", "Semi-Annually", or "Annually"):

#### 4. Designation of Remaining Funds

Upon the passing of the last surviving annuitant, the remaining principal will support our mission. Please specify if you wish to designate your gift to a specific fund or program.

Designation Preference (Type "Unrestricted" or specify a specific program):

#### 5. Signatures and Agreement

By signing below, I/we agree to the terms of the Charitable Gift Annuity agreement and acknowledge that this gift is irrevocable.

Primary Donor Signature (Sign after printing):

Date (MM/DD/YYYY):

Joint Annuitant Signature (If applicable, sign after printing):

Date (MM/DD/YYYY):