



MY LEGACY GIFT

Confidential

La Jolla Playhouse is grateful for your commitment to our mission. We want to ensure that our records accurately represent your intentions and appreciate any information you are comfortable sharing with us. This form is revocable and nonbinding.

Name(s):		
Address:		
City:	State:	Zip:
Phone(s):	Email(s):	

TYPE OF GIFT

As an expression of my/our passion for theater, I/we have included the La Jolla Playhouse in my/OUR: (please check all that apply)

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Will / Bequest | <input type="checkbox"/> Revocable Trust | <u>Charitable Trusts:</u> | <u>Beneficiary Designation:</u> |
| <input type="checkbox"/> Annuity | <input type="checkbox"/> Irrevocable Trust | <input type="checkbox"/> Remainder Trust | <input type="checkbox"/> Life Insurance Policy |
| <input type="checkbox"/> Donor Advised Fund | | <input type="checkbox"/> Lead Trust | <input type="checkbox"/> Retirement Plan |

☐ Other: _____

My/Our gift will be made after: ☐ My life ☐ Both our lives

In the estimated amount of: _____ (Optional)

DESIGNATING YOUR GIFT

I would like my/our gift to be directed to:

- ☐ General Fund ☐ Endowment Fund ☐ Other:

RECOGNIZING YOUR GIFT

Because you have chosen to leave a legacy gift, you are invited to The Revelle Legacy Society. As a member, you will receive special invitations and recognitions in print materials.

- ☐ Please recognize me/us publicly as: _____
- ☐ This gift is anonymous. I DO NOT want to be recognized publicly.

This letter of intent is an expression of my current plans. I understand that I may modify or revoke these plans and that this form is not a legal obligation binding on me or my estate.

Donor Signature: _____ Date: _____

Joint Donor Signature: _____ Date: _____

Please return to:

Keely Daximillion, Director of Philanthropy, kdaximillion@ljp.org
ATTN: Philanthropy Department, La Jolla Playhouse - PO BOX 12039, La Jolla, CA 92039
TAX ID: 95-1941117