

THE WINCHESTER BELL SOCIETY

We are privileged to welcome you into The Winchester Bell Society of the Winchester Alumni Association Scholarship Endowment Fund, Inc. The Bell Society honors those individuals who have made a planned gift or included the Alumni Endowment Fund in their estate plans. We are grateful to you for your foresight in helping to support the long-term success and growth of this fund, which has the specific purpose of investing donations to endow future scholarships to be given by the Winchester Alumni Association, Inc. to qualifying graduates of Winchester Community High School, Winchester, Indiana.

Please take a moment to complete the information below for our records. Doing so ensures that we are able to honor your intent for the use of your gift.

The Winchester Alumni Association Scholarship Endowment Fund understands that this form is non-binding and that your future bequest remains fully revocable. The specifics of your gift will be kept strictly confidential.

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I. NA	AME(S) (As you would like to be listed	on the members	hip lis	st)		
Name			Birthdate		WHS/DHS/WCHS Class Year		
Spouse/Partner			Birthdate		WHS, DHS, WCHS Class Year		
II. TY	PE A	AND VALUE OF GIFT (minimum qu	alifying donation i	is \$10	0,000.00)		
	Тур	pe of Gift	Specific Amount	OR	Percentage (with estimated value, based on today's figures)		
		Bequest gift through will/trust					
		Retirement plan beneficiary					
		Life Insurance Beneficiary					
		Other					
		Enclosed is a copy of the releva	nt section of my w	vill/tr	ust/beneficiary designation		
III.	ADDITIONAL CONSIDERATIONS						
		This gift is a pledge that may	be paid during m	y lifet	ime		
		This gift takes effect upon m	y passing				
		This gift takes effect upon th	e passing of both	myse	elf and my spouse		
		This gift is contingent, based	upon my survivin	g my	heirs or other beneficiaries		

IV. CONTACT INFORMATION	N	
Where applicable, it is helpf administering the gift.	oful to have contact information for the relevant person or entity tha	t will be
Executor/Trustee		
Name		
Address	City	
StateZip	p	
Email		
(Be sure to contact the passociation Scholarship Endov	uch as of retirement plan or life insurance policy) plan administrator listed below with your addition of the Wincl owment Fund, Inc. as a beneficiary.) pany	
V. SIGNATURES		
Date	Signature	
Date	Signature	
☐ I prefer n	not to be publicly recognized as a Winchester Bell Society member.	

THANK YOU FOR MAKING THE WINCHESTER ALUMNI ASSOCIATION SCHOLARSHIP ENDOWMENT FUND HOME OF YOUR LASTING LEGACY.

The Winchester Bell Society Fund is administered by the Winchester Alumni Association Scholarship Endowment Fund, EIN 82-5173441, a 501-c-3 non-profit public charity. Questions may be directed to Tanya Malak, 765-584-6372 of Northwest Bank, Winchester, IN 47394

Return this application to the Winchester Alumni Endowment Fund, PO Box 492, Winchester, IN 47394