



**WEST SIDE
CATHOLIC
CENTER**

Legacy

Gift

PLEDGE/INTENT FORM

This statement is an expression of my intent to provide for the future of the West Side Catholic Center through a planned or estate gift. The provision(s) made include the following:

- An outright bequest upon the passing of the donor, or the passing of the donor and spouse.
- A life insurance policy, in which the West Side Catholic Center is named as beneficiary or owner and beneficiary.
- Retirement assets, in which the West Side Catholic Center is named as a beneficiary.
- A trust agreement, with income reserved for the donor, spouse, or other income beneficiary.
- Other (please specify) _____

The estimated value of my (our) gift is \$ _____

Purpose

It is my wish that the gift be used:

- At the West Side Catholic Center’s discretion, to create the greatest impact in our community by supporting its most compelling needs and opportunities.
- To assist in growing the West Side Catholic Center’s Endowment Fund.
- For the following existing fund(s) or purpose: _____

Special circumstances of my gift include:

(Please complete back of form)

Recognition*

The West Side Catholic Center appreciates the opportunity to acknowledge your commitment to the community by publicly recognizing your contribution. If you prefer to remain anonymous, however, we will respect your wishes.

- I (we) permit the West Side Catholic Center to use my/our name(s) in printed lists of planned gifts, which may appear in the WSCC annual report, newsletter, web site and/or other publications.
- I (we) prefer to remain anonymous during my/our lifetime(s). You may recognize my/our gift after you receive it.
- I (we) prefer to remain anonymous during and after my/our lifetime(s).

Donor Signature: _____ Date: _____

Printed Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (H) _____ (W) _____ (C) _____

Email: _____

Date of Birth: _____

Spouse's Signature: _____ Date: _____

Printed Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (H) _____ (W) _____ (C) _____

Email: _____

Date of Birth: _____

Thank you for your commitment to our community and your investment in its future. If you have any questions, please contact the West Side Catholic Center at 216.631.4741 or mbernot@wsccenter.org.

**Note for couples: We are happy to list you either separately or as a couple, depending on your preference. If you would like to be recognized as a couple, please complete this form accordingly. If you are making separate planned gifts and prefer to be listed individually in all documents and/or publications, please submit separate forms, one in each name.*