

# LEGACY CIRCLE

## GIFT INTENTION FORM

Although required for you to inform us of your intention to support Playhouse Square through a legacy gift, we appreciate the information and the opportunity to acknowledge your generosity. All information you provide will remain confidential. Any public recognition of your intent will only occur with your approval on this form.

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### Donor Information

Name(s)

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Address

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City, State, Zip

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Phone \_\_\_\_\_ Email \_\_\_\_\_

We recognize our Legacy Circle members in annual, monthly and online publications. Please indicate how you would like to be recognized.

- Recognize me/us as: \_\_\_\_\_
- I/We wish to remain anonymous.

### Gift Designation

**Unrestricted**

I/We request that this gift be used in the areas of greatest need for the organization.

**Restricted**

I/We request that this gift be restricted as indicated below.

- Educational Programming
- Capital Improvements
- Endowment

**Planned Gift Information**

Playhouse Square is named as a beneficiary of one of more of the options below. If you are willing to share specific details, please include that information in the space provided.

**Will or Trust**

- Estimated Dollar Amount \$ \_\_\_\_\_
- Share of Estate: \_\_\_\_\_% Estimated \$ \_\_\_\_\_
- Specific Property *(please describe)*: \_\_\_\_\_  
\_\_\_\_\_ Estimated \$ \_\_\_\_\_
- Trust funded by will: *(name)* \_\_\_\_\_ Estimated \$ \_\_\_\_\_

**Lifetime Funded Gift**

- Charitable Remainder Trust: Estimated \$ \_\_\_\_\_
- Charitable Gift Annuity: Estimated \$ \_\_\_\_\_

**Beneficiary of a Life Insurance Policy**

Estimated \$ \_\_\_\_\_

**Beneficiary of an IRA**

Estimated \$ \_\_\_\_\_

**Beneficiary of another financial/charitable account**

Please describe: \_\_\_\_\_  
Estimated \$ \_\_\_\_\_

**This gift is:**    \_\_\_\_\_ Revocable    \_\_\_\_\_ Irrevocable

**PLEASE NOTE:** Some financial firms may not contact beneficiaries after the account owner is deceased. If Playhouse Square is a beneficiary of an account not covered in your will, you must let us know. This will help us to claim the assets at the appropriate time. It is also recommended that you inform the executor of your estate and keep thorough documentation in your records.

**Additional notes regarding my/our gift that Playhouse Square:**

\_\_\_\_\_  
\_\_\_\_\_

**Signature(s):** \_\_\_\_\_ **Date:** \_\_\_\_\_

*This form is non-binding.*

For more information or questions, contact Leanne Dewyer, Director of Advancement.

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**Mail or email form:**

Leanne Dewyer

Playhouse Square

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