

Maine Children's Home Legacy Circle

CONFIDENTIAL ENROLLMENT FORM

In consideration of the legacy and impact that Maine Children's Home for Little Wanderers has continued to have for Maine children and their families, (I/we) have made provision for a gift to Maine Children's Home (MCH) in (my/our) estate plan. (I/we) authorize MCH to include (me/us) as a member of MCH Legacy Circle as established to recognize individuals who have made this commitment.

recognize individuals who have made this commitment. Please print or type Name (s) for recognition purposes: Name of Spouse/Domestic Partner Title Title Name Date of Date of birth birth Address City State Zip Code Daytime Phone____ Evening Phone_____ (Please include area code with telephone numbers) F-Mail Address **Relationships with Maine Children's Home** (note all that apply) Board of Directors ■ Adoptive Family Camp participant (current/past) Adoptee ■ Staff/ former staff ■ Teen Parent Program Birth Family Volunteer Capital Campaign Participant Christmas Program Recipient Friend □ Other (please describe): **Gift Information** I/we qualify for MCH Legacy Circle through the following planned gift: ■ Bequest(orLivingTrust) Charitable Remainder □ IRA/Retirement PlanBeneficiary □ Cash gift/set \$ amount **Annuity Trust** Gift of Residence or Stock or property Charitable Farm with Retained Percentage bequest RemainderUnitrust Life Estate ■ Residuary bequest □ Deferred Charitable Gift □ Charitable Lead Trust Charitable Gift Annuity Annuity ■ Life InsurancePolicy Please indicate the approximate current market value of the planned gift named above: ______(Optional. This information is treated confidentially.) \$_____ The gift is: □Unrestricted □Restricted as follows_____ □ I/wewishtoremain ananonymousmember of MCH Legacy Circle. Signature_____ Signature: Date: Received by (MCH staff):

Title/Position