

Membership Form

In recognition of my strong belief and confidence in the worl	k of The Hotchkiss School,
l,	confirm that I have taken—
or will take—steps to make a planned gift to benefit the Scho	ool.

(If any of the informa		os to make a planned gift to benefit the School. Infidential nature, please indicate so on this form, accordingly.)	
Name		Phone	
Address		Email address	
City		Date of birth	
State Zip		Hotchkiss affiliation	
I have ma	de the following provis	ion for Hotchkiss in my estate plan:	
 □ Bequest 1. Residuary bequest: Hotchkiss's perce of residual value of my estate is The estimated value of this bequest is 	ntage 	Charitable Gift Annuity/Pooled Income Fund Gift Date annuity/pooled income fund account was established Original gift amount of	
 Outright bequest in my Will Bequest subject to conditions (please 	\$ e describe)	annuity/pooled income fund Current value of account \$	
☐ Remainder Trust Present size of trust principal	\$	Other Planned Gifts (please describe)	
The Hotchkiss School's percentage of remainder interest Trustee (if other than Hotchkiss) Lead Trust	<u>%</u>	Purpose of This Gift to Hotchkiss Unrestricted support for The Hotchkiss School Restricted support to benefit Other restrictions	
Present size of trust principal The Hotchkiss School's percentage of lead interest Trustee (if other than Hotchkiss)	<u>%</u>	Please include me as a member of the Town Hill Society with the opportunity to participate in any and all special programs available to Town Hill members. Also, please list my name (and/or my spouse's name) in the Town Hill Society in the following manner:	
□ Life Insurance Policy Policy face amount Current cash value	\$ \$		
Policy NumberName of Insurance		☐ I prefer that you not include my name in the published list of Town Hill Society members and that this gift be considered anonymous for public purposes.	
Type of policy Hotchkiss's interest in this policy is subject t		Signature Date	