



MARTUCCI LEGACY SOCIETY FORM

As an expression of my/our desire to contribute to the continuing work of The Sarasota Ballet, I /we have included The Sarasota Ballet in my/our estate plan. I/we understand that this statement is non-binding and does not constitute a legal promise of any future contribution.

The contribution will be made by Will or revocable trust or similar testamentary document as follows:

- ☐ Estimated value of the cash or other gift is \$ _____
- ☐ The gift will be made as a percentage of my/our estate as our bequest gift _____ %, the estimated current value of which is \$ _____
- ☐ I/we have included THE SARASOTA BALLET as a beneficiary or recipient of one or more assets, with the estimated values shown below:
 - ☐ Retirement plan(s): _____
 - ☐ Financial or investment account(s): _____
 - ☐ Life insurance: _____
 - ☐ Other asset(s): _____

My/our bequest shall be considered an/a

- ☐ Unrestricted bequest
- ☐ Restricted bequest for this purpose: _____

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Signature(s)

Date

Please print your name(s) as you prefer to be acknowledged where appropriate.

- ☐ I/we wish for this gift to remain anonymous. Please do not list my/our name.
- ☐ Date of birth _____ (MM/DD/YYYY)
- ☐ Date of birth (Spouse/Significant Other) _____ (MM/DD/YYYY)

Attorney or financial planning professional contact information:

Please return: The Sarasota Ballet
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Phone (941) 225-6512
development@sarasotaballet.org