**Bernal-Dever Legacy Society Membership Agreement**

It is my desire to provide a legacy of support for the San Antonio Foundation for Excellence in Education, Inc. dba SAISD Foundation. I am pleased to inform you that I intend to provide a planned gift or an endowed gift (after my lifetime) to benefit San Antonio Foundation for Excellence in Education, Inc. dba SAISD Foundation (Tax ID 74-2861587).

I understand that any planned or endowed gift is revocable and can be modified by me at any time. I further understand that I (or my estate) am not legally or morally obligated to fulfill this intention if I choose to modify or cancel such planned gift at a later date.

I have provided for a gift to the San Antonio Foundation for Excellence in Education, Inc.dba SAISD Foundation in my will in the form of a revocable trust, retirement plan, life insurance policy, charitable trust, planned gift, or other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please indicate type of gift by circling one of the aforementioned options or entering in the type of gift). I estimate the current value of this gift to be $\_\_\_\_\_\_\_\_\_\_\_\_. Please provide a copy of the selected document or beneficiary documentation.

*All planned giving and endowment donors qualify for inclusion and recognition as members of the Bernal-Dever Legacy Society and its events and programs. Inclusion allows the SAISD Foundation to express continued thanks for your intended or endowed gift and allows your gift intention to serve as encouragement to others.*

Please check one:

\_\_\_\_ Yes, please include me as a member of the Bernal Dever Legacy Society. My/Our family names(s) should be listed as follows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ Yes, please include me/us as a member, but I/we would like to remain anonymous.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Thank you for your generous and vital support of students through the San Antonio Foundation for Excellence in Education, Inc. dba SAISD Foundation!***