

GIFT INTENTION

THANK YOU FOR YOUR FUTURE GIFT COMMITMENT TO SEATTLE REP!

DONOR CONTACT INFORMATION					
Your Name		Birthdate			
Name of Joint Donor			Birthdate		
Address		City	State	Zip	
Tel	Email				
GIFT INFORMATION					
I/We have named Seattle Rep	o or the Seattle Repertor	y Theatre Foun	dation as a beneficiary	of my/our:	
□ Will □ Living Trust □ Ch	aritable Remainder Trust	t			
☐ Life Insurance Policy ☐ Re	etirement Assets 🛚 Oth	er (Please Spec	:ify):		
My/Our planned gift is to:					
☐ Seattle Rep or ☐ Seattle	Repertory Theatre Found	dation (Endowr	ment)		
GIFT RESTRICTIONS					
☐ My/Our planned gift is unreproductions or programming	· · · · · · · · · · · · · · · · · · ·		=	tribution in the artistic	
☐ Our planned gift is restrict *In order to ensure Seattle Rep is able to honor ye					
☐ We are interested in settin *Please contact Seattle Rep if you are interested	• .				

(OVER)

OPTIONAL GIFT INFORMATION	
The approximate value of my/our legacy gift is currently (this is optional, but helps Seattle	Rep with future planning):
☐ Attached is a copy of the relevant portions of the legal documents relating to Seattle Rep or a letter from my/our legal or financial advisor that describes t purpose of the gift (this is optional, but helps Seattle Rep with future planning).	
OVATION CIRCLE RECOGNITION	
When you include Seattle Rep in your planned giving, you become a valued membe our seasons, we gratefully acknowledge the individuals who are benefitting Seat	
\square I/We would like to be listed with other Ovation Circle members in Seattle Re	p publications as:
□ I/We prefer to remain anonymous in Seattle Rep publications	
OVATION CIRCLE EVENTS	
We would love to thank you in person! Throughout the season, Ovation Circle mopportunities to engage more fully with the theater.	embers enjoy special benefits and
☐ I would like to be invited to Ovation Circle events	
☐ I am not interested in attending Ovation Circle events	
Signature	Date
Signature	Date
Please complete and return this form to: Seattle Rep c/o Development Department, 155 Mercer Street, PO B 98109	ox 900923, Seattle, WA

If you have any questions or would like more information, please contact
Director of Development Melissa Husby
at 206.317.7583 or melissa.husby@seattlerep.org.

THANK YOU FOR SUPPORTING SEATTLE REP WITH A LEGACY GIFT!