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CHABAD TOMORROW
MAKE YOUR LEGACY A JEWISH FUTURE

JEWISH LEGACY SOCIETY COMMITMENT FORM

The Jewish Legacy Society was established to honor those individuals who are dedicated to securing a strong Jewish community by remembering Chabad Jewish Center of Shoreline in their will.

Please indicate the type of gift you would like to create:

☐ Bequest in My Will ☐ Retirement Account ☐ Gift of Life Insurance

☐ Other:_____

☐ I am leaving a percentage of my estate:_____

☐ My legacy gift is in the amount of: _____

☐ I prefer not to disclose my gift amount.

☐ You may recognize me as a member of the Jewish Legacy Society and permit my name to be listed to encourage others. My/Our name should appear as: _____

☐ I prefer to remain anonymous.

Name:_____

Address:_____

City:_____State:_____Zip _____

Phone:_____Email:_____

Signature(s)_____Date:_____