

## Planned Gift Notification Form

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

I/We have named the Belcourt Theatre as a beneficiary of my/our:

- |   |  |
|---|--|
| <input type="checkbox"/> Will                       | <input type="checkbox"/> Living Trust          |
| <input type="checkbox"/> Charitable Remainder Trust | <input type="checkbox"/> Life Insurance Policy |
| <input type="checkbox"/> Retirement Assets          | <input type="checkbox"/> Other _____           |

My/Our planned gift is:

- Unrestricted to provide maximum flexibility for the Belcourt to advance its mission
- Restricted for the following (please consult with the Belcourt if you are considering a restricted gift to ensure that the proposed restriction can be honored): \_\_\_\_\_.

My/Our gift's approximate dollar amount or percentage is (optional, but helps the Belcourt more accurately plan for the future) \_\_\_\_\_.

- I/We give permission to recognize my/our gift in Belcourt Theatre publications. (Allowing your name to be listed can inspire others to provide the Belcourt with a future gift.) The name on any listing should read as follows: \_\_\_\_\_.
- I/We wish to remain anonymous.

Thank you for sharing with us the details regarding your long-term financial plans. Information disclosed will be kept strictly confidential. This is not a legally binding document but assists the Belcourt Theatre in planning for the future.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

For more information, please contact:  
Brooke Bernard, Development Director, at (615) 846-3150 ext 21 or [brooke@belcourt.org](mailto:brooke@belcourt.org).

Please return completed form to:  
Belcourt Theatre | Brooke Bernard | 2102 Belcourt Ave | Nashville, TN 37212