



NEUMANN HERITAGE SOCIETY
Confidential Membership Information Form

Welcome to the **Neumann Heritage Society**. Please complete this membership questionnaire and return it to confirm your membership. This information is kept in strict confidence, subject to the authorizations you provide below.

Name _____ Date of Birth _____

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TYPE OF GIFT

I/We have included St. John Neumann Catholic School in my/our will or revocable trust:

- ☐ A specific bequest of \$ _____
- ☐ A percentage bequest of _____ % Est. value _____
- ☐ Other (describe) _____

I/We have included St. John Neumann Catholic School in my/our irrevocable trust:

- ☐ Charitable Remainder Unitrust
` Market Value: \$ _____ Interest: _____ % Payout: _____ %
- ☐ Charitable Remainder Annuity Trust
` Market Value: \$ _____ Interest: _____ % Payout: _____ %
- ☐ Charitable Lead Annuity Trust
` Market Value: \$ _____ Interest: _____ % # of years: _____
- ☐ Other (describe)

I/We have included St. John Neumann Catholic School as the beneficiary of:

- ☐ A life insurance policy. Death benefit: \$ _____ Cash Value: \$ _____
SJN is (check one): _____ Primary Beneficiary _____ Secondary Beneficiary
- ☐ A Qualified Retirement Plan (IRA, 401k, 403b)
SJN interest _____ % Current market value of plan: \$ _____
SJN is (check one): _____ Primary Beneficiary _____ Secondary Beneficiary
- ☐ Other (describe)

DOCUMENTATION

- ☐ Yes, I/We will share a copy of the portion of my/our will that applies to St. John Neumann Catholic School or the trust agreement or the Change of Beneficiary Form in which St. John Neumann Catholic School is named.

AUTHORIZATION FOR USE OF NAME

- ☐ I/We authorize St. John Neumann Catholic School to include my/our names on the membership list of the Neumann Heritage Society in official school publications and recognition. I/we understand that this authorization is limited to the use of my/our names only and that the type of gift and amount of my/our gift will remain strictly confidential.
- ☐ I/We prefer to remain anonymous.

SIGNATURE

DATE

Please print name

SIGNATURE

DATE

Please print name

Please return this form to:

St. John Neumann Heritage Society
3000 53rd Street
Naples, FL 34116

or email to:

jneeld@sjnceltics.org