The Legacy Society of Saint Michael the Archangel
Saint Michael's Parish, Litchfield, CT

Confidential Enrollment Form

Having considered prayerfully my love and responsibility for those I love, I am pleased to make known my provisions for enhancing the future life and ministry of Saint Michael's Parish.

- Saint Michael's Parish, Litchfield, CT, is named as beneficiary in my will dated: _____ or codicil dated: _____.
- I estimate today's value of the bequest to be: $_____.
- Saint Michael's Parish is the beneficiary of a life insurance policy on my life. The value of the policy designated for the church is: $_____.
- I have established a charitable remainder trust which names Saint Michael's Parish, Litchfield, CT as the final beneficiary. The estimated value of the trust to the church is: $_____.
- I have provided for Saint Michael's Parish, Litchfield, CT, in a manner different from above:

_____

Thank you for your thoughtful provisions that reflect your faith and help ensure the future of this parish. By planning to make the above mentioned bequest to Saint Michael's Parish, Litchfield, CT, you become a Member of the Legacy Society of Saint Michael the Archangel. The clerical and lay leadership would like to provide thoughtful recognition of your generosity and seeks your permission to include your name in the lists of donors and on a plaque to be mounted in a visible place in the church.

◊ I do ◊ I do not give permission to have my name so included.

Date: _____ Signature: _____

Name: _____

(As you wish it to be remembered, whether it is to be on the plaque or not. PLEASE PRINT.)

Address: _____

_____

_____

Phone: _____

Email: _____

This information will be acknowledged and a copy of this form returned for your files.

05/2010