



Membership Application

108 Washington St
Marshalltown, Iowa 50158

FULL NAME: _____ BIRTH DATE: _____

SPOUSE'S NAME: _____ BIRTH DATE: _____

HOME ADDRESS: _____ TELEPHONE: _____

CELL PHONE: _____

CITY, STATE, ZIP _____ EMAIL: _____

Method(s) used to qualify for membership in the Heritage Club:

_____ Will / Revocable Trust - _____% to the Y; \$_____ to the Y
{ Heritage Club as Primary Beneficiary { Heritage Club as Contingent Beneficiary

_____ Charitable Gift Annuity

_____ Outright Gift: { Cash { Stock { Property

_____ Life Insurance - \$ _____
{ Heritage Club as Primary Beneficiary { Heritage Club as Contingent Beneficiary

_____ Charitable Remainder Trust

_____ Charitable Lead Trust

_____ Named Fund

_____ Pension Plan (such as IRA, 401K) Remainder

_____ Life Estate: { Home { Farm

Purpose for which gifts are to be used when they become available for the Endowment Fund of the Heritage Club:

_____ Capital improvements for the Y

_____ Program areas of the Y

_____ Unrestricted for any use as deemed appropriate by the Y

Additional Information:

