



Foothill-De Anza Foundation Legacy Circle Form

Name _____

Address _____

Phone _____ Email _____ Birth Year _____

I/We have made a legacy gift to the Foothill-De Anza Foundation as indicated below:

- Will - Please designate: Foothill-De Anza Community Colleges Foundation
EIN# 94-3258220.
- Life Insurance Policy or Retirement Plan Beneficiary Designation.
- Trust in which Foothill-De Anza Foundation or one of the colleges is named as a beneficiary.
- Deferred Gift (i.e. Charitable Gift Annuity, Charitable Remainder Trust, Charitable Lead Trust, etc.
- Other (please describe) _____

(We welcome the opportunity to assist you in any way possible with your estate plans. Please feel free to include any documents that refer to the Foundation as a beneficiary. We will retain this in our confidential files as a record of your intention.)



Including Foothill-De Anza in your estate plans qualifies you for membership in our Legacy Circle. We will be honored to invite you to annual Legacy Circle events and include you in Circle materials unless you indicate otherwise.

- Yes I/we would like to join **The Legacy Circle**. Please list my/our names as follows:

- I/we wish to remain anonymous.

- Please have someone contact me about making additional estate plans.

FOOTHILL-DE ANZA FOUNDATION
12345 EL MONTE ROAD, LOS ALTOS HILLS, CA 94022
PHONE (650) 949-6230
foundation@fhda.edu