

# Legacy Society

Application



Over the years, many University of South Alabama alumni and friends have remembered the University in their estate plans. In recognition of such commitments to the University and USA Health, donors are invited to join the Legacy Society by documenting a planned gift through a bequest, beneficiary designation, trust, or other gift planning vehicle.

To be recognized in the Legacy Society, provide the University of South Alabama with either a copy of the specific provision that reflects your estate commitment for the benefit of the University or complete the attached Legacy Society Application. Donors may also wish to remain anonymous and are welcome to indicate as such to our office through this form.

Planned gifts may be designated for the unrestricted use of the University or for a specific college, hospital, or department. Planned gifts may also be restricted to a specific purpose of your choice. Currently, a planned gift of \$25,000 or more may be designated to create an endowed fund in memory of a loved one or to carry your own name. The annual spendable income from the endowed fund, as defined by the University of South Alabama policy, provides perpetual recognition for the person or persons named.

Your gifts at work could (examples):

- ensure assistance for undergraduate students, graduate students or student athletes by establishing a scholarship
- help provide a cure for cancer or influence patient care
- provide equipment upgrades
- hire an eminent scholar who will impact future generations of students

**You decide! How will your gift impact the University of South Alabama?**

**For further information on the Legacy Society, please contact:**

University of South Alabama  
Office of Development and Alumni Relations  
650 Clinic Drive  
TRP III, Suite 1500  
Mobile, Alabama 36688-0002  
Phone: (251) 460-7032  
Fax: (251) 461-1776  
[usalegacy.org](http://usalegacy.org)

**Please complete and return to:**

University of South Alabama, Office of Development and Alumni Relations  
650 Clinic Drive, TRP III, Suite 1500, Mobile, Alabama 36688-0002  
Phone: (251) 460-7032 Email: development@southalabama.edu

**Confidential**

This documentation will provide a basis for credit given for your proposed gift and recognition in the University of South Alabama Legacy Society, one of the University's most prestigious donor honorary organizations. Gift values are subject to approval for documentation by the USA Office of Development.

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Spouse Date of Birth: \_\_\_\_\_

USA College and Class Year (if graduate): \_\_\_\_\_

Relationship to the University: \_\_\_\_\_

**Type of Provision**

**A) I have remembered the University in the following:**

1. Will or Living Trust  Revocable  Irrevocable
2. Life Insurance Policy – USA is the  Beneficiary  Owner
3. Trust Agreement Type: \_\_\_\_\_
4. Life Estate
5. Retirement Fund Type: \_\_\_\_\_ %: \_\_\_\_\_
6. Other (please specify) \_\_\_\_\_

**B) I estimate the value of the gift to be:** \_\_\_\_\_

## Purpose of Gift

### A) My gift will be unrestricted for:

- General University – “Where the need is greatest”
- The College/School of: \_\_\_\_\_
- Department of: \_\_\_\_\_
- General Athletics or Sport: \_\_\_\_\_
- USA Health System or Hospital: \_\_\_\_\_
- USA Libraries \_\_\_\_\_
- General Endowment Scholarship Fund
- Other: \_\_\_\_\_

### B) My gift will be restricted for:

- Undergraduate Scholarship
- Graduate Scholarship
- Graduate Fellowship
- Faculty Support Fund
- Research Fund
- Program Support
- Capital Improvement/Buildings
- Equipment
- Athletic Area: \_\_\_\_\_
- Other: \_\_\_\_\_

### C) If the purpose of the gift is for an endowment, please specify an existing fund or the name of the person you want to honor in the naming of the new fund:

For endowment purposes, please list the best contact for endowment reporting once the gift is realized:

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_

Please provide any additional information on how you would best like your gift to be used:

## Gift Recognition

- I wish that my gift to the University of South Alabama remains anonymous. The University will respect your request and keep your information anonymous and withhold your name from the University’s Legacy Society Honor Roll.
- I would like my gift to be recognized in published listings of Legacy Society members and any other appropriate University of South Alabama publications under the following name(s): (Please print.)

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

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



