



SAN FRANCISCO
OPERA

BEL CANTO LEGACY SOCIETY ENROLLMENT FORM

Welcome to the Bel Canto Legacy Society—we're very grateful for your legacy gift!

I look forward to receiving invitations to special events and having my name included as a member of the Bel Canto Legacy Society in San Francisco Opera publications.

Name (please print): _____

Please use the following name(s) for recognition, if different from above:

I/We wish to remain anonymous to the public. Please do not list my/our name.

Please sign and date this form for our records:

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____

OPTIONAL: Please tell us about your estate provision(s) for San Francisco Opera Association.

I/We wish to let you know, in confidence, that my/our estate plan provides a gift for San Francisco Opera Association of approximately \$ _____.

There is no requirement to reveal the size of your gift but doing so will help the Opera better plan for its future.

I/We have designated the Opera as a beneficiary of my/our:

- | | |
|---|---|
| <input type="checkbox"/> will or living trust | <input type="checkbox"/> charitable gift annuity (CGA) |
| <input type="checkbox"/> IRA or other retirement plan | <input type="checkbox"/> charitable remainder trust (CRT) |
| <input type="checkbox"/> stocks, bonds, or mutual funds | <input type="checkbox"/> commercial annuity |
| <input type="checkbox"/> checking or savings account | <input type="checkbox"/> donor advised fund (DAF) |
| <input type="checkbox"/> life insurance policy | <input type="checkbox"/> other: _____ |

for a specific amount \$ _____ or a percentage _____ %, which as of today is valued at approximately \$ _____.

Additional information:

Please turn over and complete the rest of the form

OPTIONAL:

Please provide additional information for our records if you wish:

My/our date(s) of birth: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____ Best times to call: morning afternoon evening

I/We have notified the following professional advisor of this gift:

Name: _____

Profession: _____

Address: _____

City, State, Zip: _____

Please provide administrator or executor contact information, if applicable:

Name: _____

Company: _____

Phone/Email: _____

Plan#: _____

Return to: Andrew Maguire, Legacy Giving Officer
San Francisco Opera
301 Van Ness Avenue
San Francisco, CA 94102-4509

or email to: amaguire@sfopera.com

Thank you for your vital support of San Francisco Opera!

San Francisco Opera Association Tax ID# is 94-0836240