



Thank you for your contribution to preserve and promote East High School's past, present and future and support our students and teachers.

ENROLLMENT FORM

Planned giving is one of the many ways to give back to the East Angel Foundation (EAF) and one of the most meaningful, providing a legacy beyond your lifetime to the school that means so much to you. Alumni and families who designate the EAF in this way are recognized as members of our Heritage Society. These loyal members are helping ensure the future of our Denver East High School in a very special way.

FIRST NAME _____ MAIDEN NAME _____

LAST NAME _____ YEAR GRADUATED _____

EMAIL _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

NEXT OF KIN, NAME & ADDRESS _____

PHONE _____

PURPOSE OF PLANNED GIFT FOR THE EAST ANGEL FOUNDATION

Unrestricted fund to provide maximum flexibility for the Foundation to pursue its mission

Restricted for the following foundation program: _____

OPTIONAL

I estimate the value of this gift to be \$_____ (optional).

GIFT THROUGH WILL OR LIVING REVOCABLE TRUST

I have made the following type of planned gifts to EAF (optional):

- Bequest of 401K plan as named beneficiary
- Bequest of life insurance as a named beneficiary
- Bequest to my spouse, then eventually to the EAF
- Bequest of percentage of estate or residue of estate
- Bequest to a charitable remainder trust in my will to provide income to a survivor, then provide for the EAF
- Bequest to my children and others, and then to the Foundation
- Bequest to the EAF if my heirs do not survive me
- Bequest of specific property or amount

Through the Heritage Society, the EAF recognizes those who have included the foundation in their estate plans. With permission, names of Heritage Society members are included in the Heritage Society roster in EAF recognition publications. I understand that the publication in no way takes away my rights to change my plans at a future date.

I grant permission for my name to be published. YES _____ NO _____

In recognition of my strong belief and confidence in the work of EAF, I confirm that I have or will take steps to make a bequest or other planned gift to the East High Angel Foundation. *Tax-exempt ID 32- 0069773.*

SIGNATURE _____ DATE _____

Should you have questions, please contact info@eastangelfoundation.org.
Please mail your completed form to: East Angel Foundation, PO Box 6015, Denver, CO 80206.