



## Declaration of Intent Reservation Form

Yes, I want to state my intent to become a member of the Wertheimer Society.

Name \_\_\_\_\_

Class Year, if applicable \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail Address \_\_\_\_\_

I will qualify for membership in the Wertheimer Society by placing Lower Columbia College in my estate plan through:

\_\_\_\_\_ My Will      \_\_\_\_\_ Trust(s)      \_\_\_\_\_ Life Insurance

\_\_\_\_\_ Other: \_\_\_\_\_

\* Please contact me on a confidential basis to discuss a plan that will benefit both me and the college. The best time to call me is \_\_\_\_\_ a.m. or \_\_\_\_\_ p.m.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**– CONFIDENTIAL –**

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***Thank you for supporting Lower Columbia College!***

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