

MEMBERSHIP AND GENERAL INFORMATION FORM

I/we desire to provide for the future well-being of the Alpha Omicron Pi Foundation through a provision in my/our estate plans, and with this letter I/we are informing the AOII Foundation of our plans. I/we understand that this future commitment can be revoked or modified by me/us at any time.

With this commitment, you will become a member of the Keystone Society.

Name				
Add	lress			
City	, State, ZIP			
Phone		Email address		
	You may publish my/our name(s) in your lists of Keystone Society members as a motivation for others to leave a future gift to benefit the AOII Foundation.			
	I/we do not want my/our name(s) published.			
I/we	have made a provisio	n to leave a legacy to the AOII Fou	undation through my/our	
	Will	Retirement plan or IRA	Other	
	Living trust	☐ Life insurance policy		
I/we		enefit the		
			for its unrestricted use	



I/we wish to inform the AOII Foundation, for long-term planning purposes only, that the current value of my/our future gift is \$ (This amount is kept confidential; if your gift is a percentage of your estate, please indicate the approximate value.) I/we understand that by stating an amount my/our estate is not legally bound by this statement and that I/we may choose to add, subtract, or revoke this bequest at any time, at my/our sole discretion.
Executor's Name and Contact Information
Attorney/Advisor Name and Contact Information
I would also refer the following friend(s) who might be interested in becoming a part of Alpha Omicron Pi Foundation's Keystone Society:
Name
Address



^{**} Keystone Society is formerly known as the Second Century Society.