



UNIVERSITY LEGACY SOCIETY

Please return the form below, and we will send you information about deferred giving opportunities, along with an application for membership in the University Legacy Society.

NAME

FIRST _____ LAST _____ E-MAIL _____

MAILING ADDRESS

STREET _____ CITY _____ STATE/PROVINCE _____

ZIP CODE _____ COUNTY _____ COUNTRY _____

HOME PHONE _____ WORK PHONE _____ FAX _____

I HAVE INCLUDED LAWRENCE TECH IN MY WILL

YES NO

I HAVE MADE A PLANNED GIFT TO LAWRENCE TECH

YES NO

I PLAN TO INCLUDE LAWRENCE TECH IN MY WILL

YES NO

I ANTICIPATE MAKING A PLANNED GIFT TO LAWRENCE TECH

YES NO