



PI KAPPA PHI FOUNDATION

GATEWAY SOCIETY ENROLLMENT / VERIFICATION FORM

The Pi Kappa Phi Foundation Gateway Society recognizes those members that have included Pi Kappa Phi in their estate plans. Through a bequest, trust, life insurance policy, or other approved device, members of the Gateway Society reaffirm their belief in their Fraternity, while also helping to underwrite the future programming of the organization.

ENROLLMENT / VERIFICATION INFORMATION

In recognition of my strong belief in Pi Kappa Phi Fraternity, and my desire to leave a lasting legacy in support of Pi Kappa Phi Fraternity's mission, I _____ hereby confirm that I have made a bequest or other planned gift.

Full Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Date of Birth: _____

Preferred Phone: _____

Email: _____

1

I have made the following type of planned gift(s) to the Pi Kappa Phi Foundation. *(Check all that apply)*

- | | |
|--|---|
| <input type="checkbox"/> Gift through Will or Living Revocable Trust | <input type="checkbox"/> Charitable Remainder Trust |
| <input type="checkbox"/> Gift that provides life income | <input type="checkbox"/> Charitable Lead Trust |
| <input type="checkbox"/> Life Insurance Policy* | |

Carrier Name: _____ Policy Number: _____

2

It is the desire of the Foundation to annually recognize you as a member. By completing and returning this form, it is assumed that you intend for your name to be listed in the Pi Kappa Phi Foundation's planned giving publications including, but not limited to, the Annual Report which is published in the Spring issue of the Star & Lamp. If you do not wish to be listed, please write "DO NOT LIST" on the line below.

3

The estimated value of my planned gift to the Pi Kappa Phi Foundation is: \$ _____

Signature: _____ Date: _____