



## GIFT INTENTIONS & PERMISSIONS

Miss Porter's School Inc. is named under my:

- ☐ Will \_\_\_\_\_  
or  
☐ Revocable Living Trust \_\_\_\_\_

The provision is for:

- ☐ Specific dollar amount \_\_\_\_\_  
☐ Percentage of estate \_\_\_\_\_

- ☐ Attached is a copy of the relevant provision of my will/trust  
☐ Funding Preference: \_\_\_\_\_  
(If not for the school's general purposes.)

If I make a change to this provision, I will notify the Alumnae/Development Office at Miss Porter's School.

Name of Executor: \_\_\_\_\_ Their phone/email: \_\_\_\_\_

\_\_\_\_\_ Yes, I hereby give permission to list my name, as shown below, as a member of the Moonbeams Circle in Miss Porter's School's print and online publications:

[Name]

\_\_\_\_\_ Yes, please list my name/our names, but in another form, as follows:

\_\_\_\_\_

\_\_\_\_\_ No, please list my participation as a Moonbeams Circle member as Anonymous.

During the 50<sup>th</sup> Reunion and following, you may receive gift credit for the estimated amount of your gift.

List the email or phone number of the best way to reach you: \_\_\_\_\_

Signature: \_\_\_\_\_ Class \_\_\_\_\_ Date: \_\_\_\_\_

**THANK YOU FOR YOUR MEMBERSHIP IN MOONBEAMS CIRCLE!**

For additional information about these or other ways of giving to Miss Porter's School, please contact:

Susan MacColl Walker

Director of Gift Planning

Miss Porter's School, Alumnae/Development Office

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