

I/We wish to join the IGA Foundation Legacy Club This information will be maintained in strict confidence

Names(s):_____

Addre	ss:
City:	
State:_	Zip:Phone:
Email:	
0	I/We would like more information on providing a planned gift to support the IGA Foundation
0	I/We have provided a planned gift for the IGA Foundation through the following arrangement: O Retirement Fund Assests
	O Bequest O Trust
	O Life Insurance O Other
	The gift expectancy is valued at: