



**CONFIDENTIAL ESTATE GIFT INFORMATION**

*An expression of your commitment to  
National Association of Teachers of Singing (NATS), Inc. and/or the NATS Foundation*

NAME (S) \_\_\_\_\_

Date(s) of birth \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ CELL: \_\_\_\_\_ HOME : \_\_\_\_\_ OFFICE: \_\_\_\_\_

**ESTATE INFORMATION**

**TYPE OF ESTATE GIFT (CHECK ANY THAT APPLY)**

My/our will and/or other estate planning documents, which include a provision for:

\_\_\_\_\_ NATS, Inc.  
\_\_\_\_\_ NATS Foundation

Executed on \_\_\_\_/\_\_\_\_/\_\_\_\_

- \_\_\_\_\_ Specific Amount
- \_\_\_\_\_ Percent of estate ( \_\_\_\_\_ %)
- \_\_\_\_\_ Percent of remainder trust ( \_\_\_\_\_ %)
- \_\_\_\_\_ Remainder of estate
- \_\_\_\_\_ Beneficiary of:
  - \_\_\_\_\_ IRA or other retirement account
  - \_\_\_\_\_ Life insurance
  - \_\_\_\_\_ Living trust
  - \_\_\_\_\_ Other (describe) \_\_\_\_\_

**TO HELP US PLAN FOR THE FUTURE:**

The approximate value of my/our estate gift, based on today's value, is \$ \_\_\_\_\_

Any special purpose/designation of gift? \_\_\_\_\_

Attorney/CPA/financial advisor: \_\_\_\_\_

**RECOGNITION PREFERENCE**

\_\_\_\_\_ Please include my/our name(s), without disclosure of the amount, as legacy society member(s). I/we would like my/our name to be recorded as follows:

\_\_\_\_\_  
Or, I/we prefer this gift remains anonymous.

**SIGNATURE** \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**SIGNATURE** \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_