

## **WEBB LEGACY SOCIETY FORM**

I/We wish to be recognized with membership in the A. Norman Webb, Jr. Legacy Society and would like to join with other members to ensure the continued growth and success of USA Lacrosse and USA Lacrosse Foundation.

Name	
Address	
City State	e Zip
Phone Ema	ail
I/We have provided for the future of lacrosse in the	following manner:
O Bequest through Will or Trust	O Gift of Life Insurance
O Assignment of Retirement Plan Assets	O Charitable Remainder Trust
O Charitable Lead Trust	O Other:
The estimated current dollar value of my gift is:	
O \$10,000 - \$24,999	O \$250,000 - \$499,999
O \$25,000 - \$49,999	O \$500,000 - \$749,999
O \$50,000 - \$99,999	O \$749,999 - \$999,999
O \$100,000 - \$249,999	O \$1,000,000+
My gift is intended to be used as:	
O Unrestricted Support (Area of Greatest Nee	ed)
O Center for Sport Science & Safety	
O Diversity, Equity & Inclusion Initiatives	
O First Stick Program	
O U.S. National Team Program	
Recognition:	
O You have permission to use my/our name(s	
·	er:
O 1/ We wish to remain anonymous and do no	ot want to include my/our names in published lists
☐ I have attached a copy of the page or paragraph t	that describes my/our future gift provision.
ignature	Signature
rate	 Date