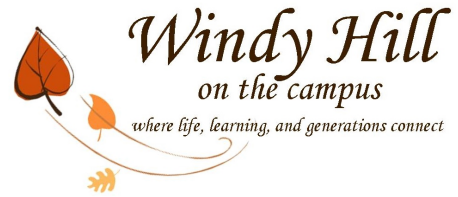


**Windy Hill Senior Center Legacy Foundation**

I/we are pleased to acknowledge that my/our estate plans include a gift to:

**Windy Hill Senior Center, Inc.**  
**1472 Roth’s Church Road, Suite 103**  
**Spring Grove, PA 17362**  
**Tax ID #: 23-2342745**



**Donor Information:**

**Name (printed)** \_\_\_\_\_

**Spouse’s Name** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **Spouse’s Date of Birth** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Permission to list as Legacy Foundation member(s)  Yes  No

**Legacy Gift Details (please check all that apply):**

- Will
- Living Trust
- Retirement Plan/IRA/401K
- Life Insurance Policy
- Charitable Trust
- Other \_\_\_\_\_

**Legacy Gift Direction (optional):**

Please direct our Legacy Gift in the following ways:

- To be used where most needed at Windy Hill Senior Center, Inc.
- To the Windy Hill Senior Center Endowment
- As a donation for a particular program: \_\_\_\_\_

**Please return this form to:**

Jenna Lawrence, Executive Director  
Windy Hill Senior Center, Inc.  
1472 Roth’s Church Road, Suite 103  
Spring Grove, PA 17362

A copy of the official registration and financial information of Windy Hill Senior Center may be obtained by calling toll-free within Pennsylvania, 1-800-732-0999. Registration does not imply endorsement.