

TWO RIVER THEATER

21 BRIDGE AVENUE
 RED BANK, NJ 07701
 T 732.345.1400
 F 732.345.1414
TWORIVERTHEATER.ORG

TWO RIVER THEATER GIFT PLANNING NOTIFICATION FORM

Legacy giving is a powerful act of generosity—an enduring gift that reflects your values and helps creativity thrive for generations to come. By including Two River Theater in your plans, you become part of every story yet to be told. Thank you for making the future of theater arts a part of your legacy.

DONOR INFORMATION

Name/s	
Birthdate/s	
Address	
City, State, Zip	
Phone/s	
Email/s	

GIFT INTENTION

I/We have named Two River Theatre Company, Inc as a beneficiary of my/our:

<input type="checkbox"/> Will/Living Trust	<input type="checkbox"/> Life Insurance Policy
<input type="checkbox"/> Charitable Remainder Trust	<input type="checkbox"/> Annuity
<input type="checkbox"/> Retirement Assets	<input type="checkbox"/> Other (please explain)

My/Our planned gift is:

- Unrestricted** to provide maximum flexibility for Two River Theater to pursue its mission.
- Restricted** for the following priority (please consult with Two River Theater):

The approximate dollar amount or percentage of our gift is:
(optional, but this helps Two River Theater with future planning)

Attached is a copy of the relevant portions of the legal documents relating to my/our future gift to Two River Theater, or a letter from my legal, or financial advisor describing the nature and purpose of the gift.

ESTATE ATTORNEY/FINANCIAL ADVISOR CONTACT

Name: _____ Phone: _____
 Address: _____
 Email: _____

SIGNATURES

Signature: _____ Date: _____

Signature: _____ Date: _____

LEGACY SOCIETY

Please share with us the reason you want to make such a meaningful gift to Two River Theater:

RECOGNITION

I am/We are pleased to accept membership in the Two River Theater Legacy Society, which honors those who have included the theater in their long-term financial plans. Membership is based upon information provided about my/our future gift.

I/We prefer to be listed in publications and donor listings.

Please list me/us as: _____

I/We prefer to be anonymous in publications but wish to accept other benefits of membership.

MEMBERSHIP BENEFITS

- Recognition in publications and donor listings.
- Invitations to special events and behind-the-scenes experiences.

Thank you for sharing details regarding your long-term financial plans. Information disclosed will be kept strictly confidential. This is not a legally binding document.

Please return completed form to:

Two River Theater
Development Department
21 Bridge Avenue
Red Bank, NJ 07701

Legal Name: Two River Theatre Company, Inc.

Tax ID #: 52-1857757

For more information, please contact Megan Powers, 732-345-1400 x1805 or mpowers@trtc.org.