



The Winona State University Foundation is included in our (my) estate plan, and we (I) accept your invitation to be enrolled as member(s) of The 1858 Founders Society.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

By completing the following, we (I) understand ONLY our (my) name(s) will be listed with other members of The 1858 Founders Society. Please list our (my) name(s) as follows:

**Please Print**

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone(\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**OPTIONAL INFORMATION**

As an expression of our (my) commitment to the mission of WSU, we (I) have made provision(s) for the WSU Foundation. It is our (my) understanding that all information will be kept in strict confidence and that we (I) may modify or revoke this arrangement at any time – it is not a legal obligation binding on our (my) estate:

- Will
- Life Insurance Policy
- Trust Agreement
- Retirement Plan
- Other (please describe) \_\_\_\_\_

Purpose of Gift:  Unrestricted  Restricted to \_\_\_\_\_

Approximate Value of Gift: \$ \_\_\_\_\_ or % \_\_\_\_\_ of residue

**THANK YOU FOR SUPPORTING OUR MISSION  
"Community of Learners Improving our World"**