

*Benefactor Society*  
Acceptance of Membership Form

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

Class \_\_\_\_\_ My main campus affiliation is with: Gorham \_\_\_\_\_ Portland \_\_\_\_\_ L/A

Address \_\_\_\_\_

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

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Birth date(s) \_\_\_\_\_

E-mail \_\_\_\_\_

Social Security No.(s) \_\_\_\_\_

Yes, please register me/us on the rolls of USM's *Benefactor Society*. My/our membership acceptance will be made out in the following name(s)

\_\_\_\_\_  
(Please print exactly as you want them to appear)

I prefer *anonymous* membership.

Date: \_\_\_\_\_

My gift to the University of Southern Maine, University of Southern Maine Foundation is in the following form:

<u>Type of Provision</u>	<u>Estimated Amount</u>
Bequest	_____
Trust Under Will	_____
Charitable Gift Annuity	_____
Deferred Gift Annuity	_____
Charitable Remainder Trust	_____
Retirement Plan	_____
Life Insurance	_____
Charitable Lead Trust	_____
Outright Gift for Endowment	_____
Other	_____

If your gift is to benefit a particular area of the University, please specify:

Please send me sample bequest language for my attorney's review

Attorney's name \_\_\_\_\_

Contact Information:

Mail to:

Dick Sturgeon

Planned Giving Officer

University of Southern Maine Foundation

University of Southern Maine

P.O. Box 9300, Portland, ME 04104-9300

or call: (207) 780-4448

or email: [sturgeon@usm.maine.edu](mailto:sturgeon@usm.maine.edu)

Note: The information on this form will be held in the strictest confidence and placed in secure confidential files.