



Legacy of Hope Society – Planned Gift Intention Form

The Mourning Hope Grief Center gratefully recognizes donors who have included Mourning Hope in their will, estate or long-term giving plans. By joining our Legacy of Hope Society, you ensure that compassionate support for grieving children, adults and families continues for generations to come.

Donor Information

First and Last Name(s): _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Email Address: _____

Please provide your birth date(s) for our gift records:

Name: _____ Birth Date: ____/____/____

Name: _____ Birth Date: ____/____/____

Gift Details

In recognition of the important role Mourning Hope plays in supporting bereaved individuals and families, I/we are pleased to have included Mourning Hope in our estate plans. I/we understand that this disclosure of my/our intention is not legally binding and that I/we may add or modify it at any time.

It is my/our intent to support Mourning Hope as a beneficiary through my/our:

Will Trust Donor Advised Fund Retirement Plan Real Estate
Charitable Gift Annuity Life Insurance Policy Other: _____

Date arrangement originated: ____/____/____

Name of Advisor/Agent: _____ Phone: _____

I anticipate the value of my future gift to be: \$_____ or ____ % of estate (optional).*

Gift Designation

I/we request the gift is to be used for: Area of greatest need Other: _____

Please contact me/us to discuss ways to structure or designate my legacy gift.

This future gift is made in honor or in memory of _____

I/we have chosen to make this commitment because (optional**): _____

Recognition

I/we authorize Mourning Hope to include my/our name(s) in donor listings and Legacy of Hope Society materials. I/we understand the anticipated gift value will be kept confidential.

Name(s) as you wish to be recognized: _____

I/we wish to remain anonymous. Please do not share my/our name(s) publicly.

Signature: _____ Date: ____/____/____

Signature: _____ Date: ____/____/____

Please submit the completed form to:

Mourning Hope Grief Center
Development Team
1311 S. Folsom St.
Lincoln, NE 68522

Unless you authorize the sharing of your name(s) or the reason for your gift, all information gathered from this form will be kept strictly confidential and used solely to ensure that your gift intentions are honored. For questions or to update your information, please contact Mourning Hope’s Development Team at 402.488.8989 or hope@mourninghope.org.

*Optional disclosure to be used for internal planning purposes only.

**Optional disclosure that may be used in promotional materials to inspire others to give.