



## Encore Society

### CONFIDENTIAL MEMBERSHIP ENROLLMENT FORM

\*required information

\*Name (please print): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*Telephone: \_\_\_\_\_ \*Email: \_\_\_\_\_

\*I/we have included NHMF in my/our estate plan. The gift is in my/our:

Will

Revocable trust

Life insurance policy

Charitable remainder trust

Retirement account

Other \_\_\_\_\_

The approximate value of your planned gift if we received it today: \$ \_\_\_\_\_

NOTE: NHMF Encore Society listings will never reveal your gift amount. We understand that this amount can change over time or may be revoked. We use it for planning purposes only.

\*We agree to include my/our name(s) in the list of Encore Society members. I/we wish my/our name(s) to appear as (for example, Jane D. and John Q. Doe):

\_\_\_\_\_

Please do not publish my/our name(s) on the Encore Society list. I/we prefer to be listed as "anonymous."

\_\_\_\_\_  
\*Signature

\_\_\_\_\_  
\*Signature

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

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

Thank you for choosing to include the New Hampshire Music Festival in your future plans.

To return this form or for any questions, please contact

Erin Brooker-Miller, Executive Director

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Tax ID: #02-0245614

I/we completed this form electronically and my/our printed signatures are valid.