

**Heal the Bay Poseidon Legacy Circle  
Declaration of Intent**

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Spouse or Family Member

\_\_\_\_\_  
Birthdate

**I pledge** to provide support from my estate plan for the mission and goals of Heal the Bay with one or more of the following planned gifts:

- Bequest (will or living trust)
- Charitable Gift Annuity
- IRA or other retirement plan
- Charitable Remainder or Lead Trust
- Insurance Policy
- Other \_\_\_\_\_

**The estimated value** of this gift is \$ \_\_\_\_\_

**The intended use** of this gift is to benefit Heal the Bay by supporting:

- General Operations in achieving the organization's mission and goals.
- Coastal Cleanup Day (Ongoing)
- Beach Report Card
- Science and Policy Department
- Programs
- Other \_\_\_\_\_ (please specify a specific program)

**I want to be recognized as:** Because I have pledged to make a planned gift to Heal the Bay, please include me, without disclosure of amount, in Heal the Bay materials (print and online). I would like to be listed as:

\_\_\_\_\_  
Name (Please Print)

I would like this gift to remain anonymous. Please do not list my name in Heal the Bay Materials and acknowledge me as "anonymous" or \_\_\_\_\_.

Heal the Bay uses this form to ensure that we comply with your personal intentions and to help us plan for the future of our organization. Your donor records are highly confidential and protected by organizational policy.

