



Our Lumen Christi Legacy Society Chapter is created to honor those who have named the parish as a beneficiary with a legacy gift.

INTENTION FORM

Please print.

Full Name: _____

Spouse's Full Name: (if applicable) _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Parish: _____

Write your name(s) as you would like appear on our Parish's Lumen Christi Legacy Society Chapter membership list, or if you choose to remain anonymous, write "Anonymous":

I/We have remembered _____ (parish name) as a beneficiary of one or more of the following instruments: (no minimum is required)

____ Last Will and Testament ____ Retirement Plan ____ Life Insurance Policy ____ Real Estate

____ Charitable Gift Annuity ____ Charitable Remainder Trust ____ Charitable Lead Trust

____ Other: _____

I/We estimate the current value of the gift is approximately \$ _____ or _____ % of the above legacy gift.

Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Please return your form to: The Basilica of Saint Andrew
Attn: Tim Heffron
631 N. Jefferson Street
Roanoke, Virginia 24016