



## Enrollment Form

The All Saints' Legacy Society honors individuals who make an investment in future ministry by including a congregation, the Diocese of Maryland, or other Episcopal institution in their estate plans or through life income gifts to a donor designated fund.

I (We) accept the invitation to join the ***All Saints' Legacy Society*** of the Episcopal Diocese of Maryland.

**Name(s):** \_\_\_\_\_

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

**Phone & Email:** \_\_\_\_\_

**Congregation:** \_\_\_\_\_

On the roll of the All Saints' Legacy Society, I (we) wish my (our) name(s) to appear as: \_\_\_\_\_

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

I consent for my (our) name(s) to appear with others on the public roster of the Society.

I (We) wish to remain anonymous.

*Please return this form to the Development Office of the Episcopal Diocese of Maryland*

**Thank you very much!**  
Your gift will be a blessing to many.



THE DIOCESE OF MARYLAND