



THE TOWER SOCIETY

We are privileged to welcome you into the Tower Society of Ohio Wesleyan University, which honors those individuals who have included Ohio Wesleyan in their estate plans. We are grateful to you for your foresight in helping to support the long-term success and growth of our University.

Please take a moment to complete the information below for our records. Doing so ensures that we are able to honor your intent for the use of your gift and, if applicable, to count your gift in fundraising progress.

Ohio Wesleyan University understands that this form is non-binding and that your future bequest remains fully revocable. The specifics of your gift will be kept strictly confidential.

I. NAME(S) *(As you would like to be listed on the membership list)*

Name _____ Birth Date _____ OWU Class Year _____

Spouse/Partner _____ Birth Date _____ OWU Class Year _____

II. TYPE AND VALUE OF GIFT

Type of Gift	Specific Amount	OR	Percentage (with estimated value, based on today's figures)
Bequest gift through will/trust	_____		_____
Retirement plan beneficiary	_____		_____
Gift Annuity or Charitable Trust managed by OWU	_____		_____
Life insurance beneficiary	_____		_____
Other Charitable Trust (not managed by OWU)	_____		_____
Other type of gift _____	_____		_____

Enclosed is a copy of the relevant section of my will/trust/beneficiary designation

III. USE OF THE GIFT BY OHIO WESLEYAN

Unrestricted, to be used for the highest priority as determined by the OWU Board of Trustees

Restricted, to be used for _____

IV. ADDITIONAL CONSIDERATIONS

This gift takes effect upon my passing

This gift takes effect upon the passing of both myself and my spouse

This gift to OWU is contingent, taking effect if I survive my heirs or other designated beneficiaries

V. CONTACT INFORMATION

Where applicable, it is helpful to have contact information for the relevant person or entity that will be administering the gift.

Executor/Trustee

Name _____

Address _____

Phone/Email _____

Beneficiary Designation (such as of retirement plan or life insurance policy)

Administrator/Company _____

Additional Information/Contacts You Would like Us to Know (such as family or friends to whom we may express our gratitude for your gift)

Why Has Ohio Wesleyan Been an Important Part of Your Life? (optional)

VI. SIGNATURES

Date _____ Signature _____

Date _____ Signature _____

I prefer not to be publicly recognized as a Tower Society member.

THANK YOU FOR MAKING OWU HOME OF YOUR LASTING LEGACY

The Tower Society at Ohio Wesleyan University is administered by the Office of Gift Planning. Questions may be directed to (740) 368-3043 or giftplanning@owu.edu.