## THE WALTER PISTON SOCIETY

## CONFIDENTIAL MEMBERSHIP ENROLLMENT FORM

Name (please print):		Date of Birth:
Name of Spouse:		Date of Birth:
Address:		
Telephone:	_ Email:	

I/we have included the Boston Symphony Orchestra in my/our long term financial plans as described on the reverse side of this form and wish to enroll in the Walter Piston Society.

□ Please include my/our name in the Walter Piston Society membership lists.

My/our name should be listed as:

 $\Box$  I/we wish to remain anonymous.

Signature

Signature

Date

The Walter Piston Society honors those who have included the Boston Symphony Orchestra, Boston Pops, or Tanglewood in their long term plans. Members are offered a variety of benefits including invitations to special events, lectures, and seminars in Boston and at Tanglewood. Piston Society members are recognized in program books and the BSO's annual report.

## Please remember to complete the second page of form

## Thank you for providing the BSO's Office of Planned Giving with details regarding your estate plans. The information disclosed in this questionnaire will be kept strictly confidential.

$\Box$ I/we have included the Boston Sympho	ony Orchestra, Inc. in my/our will or revocable trust:
□A specific bequest of \$	
□ A percentage bequest of	% Estimated value of BSO share: \$
	% Estimated value of BSO share: \$
□ Other (please describe):	
□ I/we have named the Boston Symphony income arrangement:	y Orchestra, Inc. as a beneficiary of an irrevocable trust or life-
□ Charitable Remainder Trust	BSO interest:% Estimated value: \$
Date established:	Original value: \$ Current value: \$
□ Charitable Lead Trust	BSO interest:% Estimated value: \$
Number of years:	_
□ Other (please describe):	
□ I/we have made the Boston Symphony	Orchestra, Inc. the beneficiary of:
$\Box$ A life insurance policy	Face value: \$ Cash value: \$
□ A qualified retirement plan	BSO interest:% Estimated value: \$
Primary or Secondary Benefic	ciary (please circle one)
□ Other:	
Designation of my/our planned gift:	
□ Unrestricted □ Boston Sympho	ony Orchestra 🛛 Boston Pops 🖓 Tanglewood
□ Tanglewood Music Center □ Othe	er details or restrictions, if any (please describe):

□ I/we have attached a copy of the portion of my/our planning document that pertains to the BSO.