Academy of Nutrition and Dietetics Foundation

120 South Riverside Plaza
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www.eatright.org

Academy of Nutrition and Dietetics Foundation Planned Gift Declaration of Intent

I/We, _____on this date, _____, agree to make a commitment to the Academy of Nutrition and Dietetics Foundation, through an estate gift.

OPTIONAL:
This gift is in the form of:

☐ Bequest ☐ Trust

☐ Other, please describe: _____

The current estimated value of the gift is: _____

The Academy of Nutrition and Dietetics Foundation will maintain your information in complete confidence.

Please print your name as you would like it to appear in all recognition announcements. Include spouse's name, if appropriate.

Name: _____

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City: _____State:_____Zip:_____

Phone: (____) _____

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☐ Please keep my donation anonymous.

_____ _____
Signature (s) Signature (s)

_____
Date

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