



CDGA Legacy Society Giving Acknowledgement/Confirmation Form

Leaving A Legacy

The CDGA Legacy Society honors individuals who have included the CDGA Foundation in their estate or financial plans. By joining, you help ensure that the spirit and values of golf continue to brighten lives throughout Chicago District communities for generations to come.

If you have made such arrangements – or plan to – please let us know by completing this form. Sharing your intentions allows us to assist you with your legacy, express our gratitude and welcome you as a valued member of our Legacy Society.

Donor Information

Name: _____ Birth Date (MM/DD/YYYY): _____

Name (if joint gift): _____ Birth Date (MM/DD/YYYY): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone(s): _____

Email(s): _____

Please list my/our names(s) as the following for recognition purposes:

I/We wish to remain anonymous



Chicago District Golf Association • CDGA Foundation
11855 Archer Avenue • Lemont, IL • 60439
www.CDGA.org



Gift Information

A. Type of Planned Gift:

Yes, I/We intend to support the CDGA Foundation through a planned gift via:

- Will or Living Trust
- IRA, Pension, 401k, 403B, Retirement Account
- Life Insurance Policy
- Charitable Remainder Trust (CRT)
- Charitable Lead Trust (CLT)
- Donor Advised Fund (DAF)
- Other (Please specify): _____

Optional: Estimated value of gift:

\$ _____ or _____% of estate/trust

(Because estate values often change over time, designating a percentage can help maintain your gift's intended value.)

B. Designation of Gift:

- Unrestricted:** Please use my/our gift where the need is greatest
- Restricted:** I/We wish my/our gift to support the following area(s): _____

If you include the CDGA Foundation in our will or living trust, please use the following designation:

- **The Chicago District Golf Association (CDGA) Foundation, Inc., an Illinois nonprofit organization with its principal address at 11855 Archer Avenue, Lemont, IL 60439**
- **Tax Identification Number: 36-2374223**
- **Date of Incorporation: October 1948**





Signature

Donor: _____

Date (MM/DD/YYYY): _____

Donor: _____

Date (MM/DD/YYYY): _____

Documentation (optional but helpful)

To ensure we can accurately honor your intentions, please consider sharing related documentation – such as a copy of the page from your will or trust that mentions your gift and the title page identifying the document. This helps the Foundation plan effectively and ensures your wishes are fulfilled as intended.

Important Notice

We encourage all donors to consult with an attorney, financial advisor, accountant or other qualified professionals before finalizing planned giving decisions.

Contact Information

For questions or to discuss your legacy plans, please contact:

- **Rob Dauphinais**, Sr. Director of Development | rdauphinais@cdga.org | 630.685.2311
- **Scott Tews**, Director of Development | stews@cdga.org | 630.685.2343



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