



**Legacy Society Membership  
Donor Commitment form**

Name of donor(s): \_\_\_\_\_

\_\_\_\_ Yes, I/we have included Next Door Solutions to Domestic Violence in my/our estate or financial plan.

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

**Recognition**

Initial \_\_\_\_\_ I/we would be pleased to be recognized as a member of the Legacy Society.

I understand that the agency recognizes Legacy Society members in certain publications, unless otherwise instructed.

Initial \_\_\_\_\_ I/we prefer NOT to be listed in any publications.

If applicable, how would you like to be listed? (Please write below.)

\_\_\_\_\_

**Donor Information**

Name: \_\_\_\_\_

Spouse's Name (if applicable): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form to: *Next Door Solutions, 234 E Gish Road, Ste. 200, San Jose, CA 95112*

**Thank you for your generous support!**

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*For Agency Use – Original in File and signed copy to Director of Development*

Received by: \_\_\_\_\_  
Signature of Director of Development \_\_\_\_\_ Date \_\_\_\_\_

Acknowledgement sent \_\_\_\_\_ Date \_\_\_\_\_