



**THE SHAW SOCIETY**  
LEGACY GIVING | BOSTON COLLEGE

**STATEMENT OF COMMITMENT**  
**ESTATE PROVISION**

**CONFIDENTIAL**

Name \_\_\_\_\_

Spouse \_\_\_\_\_

Class year(s) and school(s) \_\_\_\_\_ Parent year(s) \_\_\_\_\_

Mailing address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Date of birth \_\_\_\_\_ Spouse date of birth \_\_\_\_\_

I /  We have named Boston College as a beneficiary in one or more:

- Will
- Trust
- Life insurance policy
- IRA, pension, or other retirement account
- Donor-advised fund
- Other (please specify) \_\_\_\_\_

Gift Amount \_\_\_\_\_ Gift Designation \_\_\_\_\_

*For provisions reflected as percentages and remainders, please provide a good-faith estimate of the current gift value.*

Will this gift to Boston College be distributed following the death of any additional persons (e.g., spouse, child, or sibling)? \_\_\_\_\_

If yes, please share the name, relationship, and birth date of each individual. \_\_\_\_\_

**Please enroll me/us in the Shaw Society:**

- I/We may be included in a published list of Shaw Society members.
- I/We prefer to remain anonymous.

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

*Boston College recognizes that both the value of deferred gifts and the provisions themselves may change over time. This form is used for gift recognition purposes only, and it does not bind your estate or heirs in any way.*



**BOSTON COLLEGE**

Office of Gift Planning • Cadigan Alumni Center  
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