Statement of Intent



Membership in the Charles D. Kakuk Legacy Society is reserved for individuals who have made a provision for Next Act Theatre through deferred gift designations.					
	an expres signation th	sion of my/our commitment to nrough:	o Next Act Theatre, I∕v	ve have made a deferred gift	
	□ Will(s)	/estate(s)	□ Gift(s) of life insurance	□ Trust(s)	
	□ IRA or	Other Retirement Asset(s)			
In the approxi		imate amount of \$	OR	percentage of	
		I/We have included a copy of the portion of my/our estate document which names Next Act Theatre as a beneficiary.			
	I/We give permission to list my/our name(s) as a member(s) of the Charles D. Kakuk Legacy Society				
Please list my/our names as:					
	(Name to be placed on website and printed materials)				
	□ As a member of the Charles D. Kakuk Legacy Society , I wish to remain anonymous.				
Although Next Act Theatre is currently listed as a beneficiary in my/our estate(s), I/we do not wish to be a member of the Charles D. Kakuk Legacy Society or listed as such.					
I/We wish to direct our support to the following:					
Where the needs are the greatest at the time the gift is received.					
□ Other:					
This statement of intent is an expression of my/our present plans and is subject to change or modification by me/us. If changes are made, I/we will notify Next Act Theatre.					
Date		Signature		Please Print Name	
Date		Signature		Please Print Name	
The undersigned, being a duly authorized officer of Next Act Theatre does hereby accept this gift.					
Date		Development Manager Sig	gnature	Please Print Name	
P.O. Box 394, Milwaukee, WI 53201 (414) 278-7780 (Administrative) tawnie@nextact.org www.nextact.org					