



Cavalier Legacy

I am pleased to provide this information and agree to notify the Virginia Athletics Foundation of any changes to this plan. This gift is a revocable gift, and I understand that the information I have provided does not legally obligate me or my estate in any way.

Name _____
Address _____
City, State, ZIP _____
Home Telephone _____
Business Telephone _____
Email Address _____

I have included the Virginia Athletics Foundation in my plans as follows:

- Bequest
- Retirement Plan
- Life Insurance
- Trust
- Other

Estimated Gift to VAF: \$ _____

I would like my gift to be used to support: _____

Signature _____

Date _____