

## SPECIAL PURPOSE ENTITY WAITLIST INTENT FORM

## INVESTOR INFORMATION:

INVESTOR INFORMATION:		
Please Print Name		Spouse's Name
Mailing Address		
Phone Number	Email Address	Today's Date
ACCREDITED INVESTOR CRITERIA (must check one):		
Income Test: My individual income exceeded \$200,000 in each of the two most recent years or my joint income together with my spouse exceeded \$300,000 in each of those years; and I reasonably expect to earn individual income of at least \$200,000 for this year or joint income with my spouse of at least \$300,000 this year.  Net Worth Test: My individual net worth, or my joint net worth together with my spouse, exceeds \$1,000,000.		
DESIGNATION:		
Please apply my contribution as follows (check election)		
Unrestricted, our area of greatest need.		
Restricted to:	Name of School	%
	Name of School	%
	Name of School	%
Please allow 10% of my gift to be applied as Unrestricted		

TOTAL CONTRIBUTION AMOUNT PER YEAR (\$5,000.00 minimum)