



Named after Dr. J. Robert Lovett, founding chair of the Da Vinci Science Center and emeritus trustee, members of the Lovett Legacy Society embody Bob's bold vision of ensuring sustainability for Da Vinci Science Center experiences that will bring **Science to Life and Lives to Science** for generations to come.

If your plans include a gift for the Da Vinci Science Center through your will, living trust, or another type of planned gift, we thank you for your generosity. We invite you to join the Lovett Legacy Society by completing this form.

**Please print, fill out and mail to the address below, or you may scan and email to [maryellen@davincisciencecenter.org](mailto:maryellen@davincisciencecenter.org)**

Da Vinci Science Center • Office of Philanthropy • 3145 Hamilton Blvd. Bypass • Allentown, PA 18103  
• Attn: MaryEllen Dickey

**I have made the following provision(s) for a gift to the Da Vinci Science Center via:**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Will of Living Trust       | <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Retirement Plan Designation |
| <input type="checkbox"/> Charitable Remainder Trust | <input type="checkbox"/> Other: _____   |  |

Estimated current value of planned gift \$ \_\_\_\_\_

(We realize that many planned gifts are revocable, and we appreciate your consideration for future support)

**My/Our Future Gift Is:**

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Unrestricted | <input type="checkbox"/> Restricted to the following purpose: |
|---------------------------------------|---|

\_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

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

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

*I am pleased to be recognized for this gift. Da Vinci Science Center is authorized to list the following name(s) as a member of the Lovett Legacy Society.*  *I wish to remain anonymous.*

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

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

Please be assured this form does not create a legal or binding commitment upon your estate. We would simply like to thank you for your thoughtful planning and to make sure your gift is used as you intended. If you would like to designate your gift for a specific purpose, please contact us so we can make sure the designation accurately reflects your intentions. **Please contact MaryEllen Dickey, Chief Philanthropy Officer, at [maryellen.dickey@davincisciencecenter.org](mailto:maryellen.dickey@davincisciencecenter.org) or 610-703-7171.**