



**OLD STURBRIDGE**  
LIVING ★ LEARNING ★ LEADING

## The George Washington Wells Society

One of the simplest ways to support Old Sturbridge Village and the preservation of history is to make a gift within your estate plans. Through a bequest provision in your Will or Trust, or adding the Village as a beneficiary of your life insurance policy or unused retirement assets, you become part of a growing group of generous donors who comprise our legacy society, the *George Washington Wells Society*.

Please complete the information below and send this form to one of the provided addresses, or complete it online by scanning the QR code.

**Complete online:**



**Mail to:**

Bridget Baratta  
Vice President for Development & Membership  
Old Sturbridge Village  
1 Old Sturbridge Village Rd.  
Sturbridge, MA 01566

**Email to:**

bbaratta@osv.org

All information will remain confidential. Thank you!

Name(s) \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(please print)

Name(s) \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(please print)

☐ I/We have included Old Sturbridge Village in my/our **will**

☐ A specific bequest of \$\_\_\_\_\_

☐ A percentage bequest of \_\_\_\_\_%. Estimated value \$\_\_\_\_\_

☐ Other (describe): \_\_\_\_\_

☐ I/We have made arrangements for the following (check any/all that apply):

☐ **A life insurance policy.**

The Foundation is ☐ Primary beneficiary ☐ Secondary beneficiary (please check one)

☐ **A Qualified Retirement Plan** (e.g. IRS, 401k, 403b)

The Foundation is ☐ Primary beneficiary ☐ Secondary beneficiary (please check one)

☐ **Other**

Please Describe: \_\_\_\_\_  
\_\_\_\_\_



**OLD STURBRIDGE**  
LIVING \* LEARNING \* LEADING

## The George Washington Wells Society

---

### PURPOSE

My/our future gift is:

- ☐ Unrestricted
- ☐ Restricted for the following purpose(s) : \_\_\_\_\_
- \_\_\_\_\_

### DOCUMENTATION

- ☐ Yes, I/we will share a copy of the portion of the documents that applies to Old Sturbridge Village or the trust agreement or Change of Beneficiary Form (401k, 430b, IRAs, Insurance) in which the Foundation is named. Please mail / scan to:

Bridget Baratta  
Vice President for Development and Membership  
Old Sturbridge Village  
1 Old Sturbridge Village Rd.  
Sturbridge MA 01566  
bbaratta@osv.org

### AUTHORIZATOIN FOR USE OF NAME (Please select one option)

- ☐ I/we authorize Old Sturbridge Village to include my/our name(s) as a member of the George Washington Wells Society in publications. I/we understand that this authorization is limited to the use of my/our name(s) only, and that the type and amount of my/our gift to the Foundation will remain confidential.
- ☐ I prefer to remain an anonymous member of the George Washington Wells Society.

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

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

Please contact Bridget Baratta, V.P. for Development, or Jeff Burdick, Planned Giving Ambassador, with any questions.

Bridget Baratta	Jeff Burdick
772-486-4046	774-230-3485
bbaratta@osv.org	jburdick@osv.org

*We are grateful for you and the other members of the George Washington Wells Society who have left a legacy through Old Sturbridge Village.*

---