

# LETTER OF INTENT

## YITZHAK & LEAH RABIN LEGACY SOCIETY



Israel Tennis & Education Centers Foundation  
3275 West Hillsboro Boulevard, Suite 102 | Deerfield Beach, FL 33442 | (954) 480-6333

Thank you for your intention to include the Israel Tennis & Education Centers Foundation (ITEC) in your estate plan. We ask that you complete this form with as much detail as you are willing to share. Any information about your gift will remain confidential and does not create a binding obligation.

### Your Legacy, Our Shared Future

By joining the Yitzhak & Leah Rabin Legacy Society, you are helping ITEC shape a brighter future for Israel's youth. Your legacy will honor the values of inclusion, education, leadership, and resilience—principles that defined the lives of Yitzhak and Leah Rabin and remain central to ITEC's mission today.

### Personal Information

Full Name

Spouse/Partner's Name (if applicable)

Date of Birth

Spouse/Partner's Date of Birth (if applicable)

Address

Email  Phone

### Professional Contacts

Attorney's Name

Attorney's Phone/Email

Executor's Name

Executor's Phone/Email

**Please note ITEC's Tax ID (EIN): 13-2961273**

### Sample Will Wording

To include ITEC in your will, you may use the following language:

"I give to the Israel Tennis & Education Centers Foundation, a New York non-profit corporation, presently located at 165 E. 56th Street, Floor 2, New York, NY 10022, the following: \_\_\_\_\_."

## About Your Legacy Gift

In recognition of my strong belief in the mission and programs of the Israel Tennis & Education Centers Foundation, I/we have made a Planned Gift as part of my/our estate plan in the following form(s):

- Will or Revocable Trust  
Amount or %: \$ \_\_\_\_\_ or \_\_\_\_\_%
- Bank or Brokerage Account  
Institution   
Amount or %: \$ \_\_\_\_\_ or \_\_\_\_\_%
- Charitable Remainder Trust  
Amount or %: \$ \_\_\_\_\_ or \_\_\_\_\_%
- IRA or Retirement Plan  
Institution   
Amount or %: \$ \_\_\_\_\_ or \_\_\_\_\_%
- Life Insurance Policy  
Amount or %: \$ \_\_\_\_\_ or \_\_\_\_\_%
- Other (please describe)   
Amount or %: \$ \_\_\_\_\_ or \_\_\_\_\_%
- A copy of the provision is attached or will be sent when executed.

## Designation of Gift

Please designate my legacy gift for the purpose of:

- Unrestricted Support
- Specific Program/Location:

## Gift Recognition

- Please include me as a member of the Yitzhak & Leah Rabin Legacy Society, with recognition on:

- The Wall of Honor at ITEC's National Center in Ramat Hasharon
- The ITEC website and publications

*A minimum planned gift of \$25,000, above and beyond annual operating support, is required for recognition.*

- Please recognize my name or family as follows:
- I prefer to remain anonymous and do not wish to be listed.

Signature  Date

Spouse/Partner's Signature (if applicable)  Date

## Additional Information & Benefits

As a member of the Yitzhak & Leah Rabin Legacy Society, you will receive:

- A commemorative certificate of membership
- Recognition on the Wall of Honor at Ramat Hasharon
- Invitations to exclusive events
- Opportunities to engage with our leadership and legacy community

## Next Steps to Create Your Legacy

- Meet with ITEC's Development Team
- Make a promise to include ITEC in your legacy plan
- Meet with your legal advisor
- Use sample language provided by ITEC to finalize your gift

To submit this form or for questions, contact: Macey Markowitz, [mmarkowitz@itecenters.org](mailto:mmarkowitz@itecenters.org)  
Thank you for your lasting commitment to the Israel Tennis & Education Centers Foundation