

GIFT RESTRICTION RELEASE FORM

Tree of Life Lutheran Church

3201 North Loop 336 West
Conroe, TX 77304
(936) 539-9530

TAX ID#: 76-0470920

Date: _____

Donor Name(s): _____

Amount: _____

Type: [] Gift to Tree of Life Lutheran Church [] Gift to Tree of Life Lutheran Church Endowment

Restriction:

Donor Release:

In the rare event the gift is unable to be used as intended by the donor due to a lack of funding, need, or program; and after a review period of at least 12 months; and in alignment with the Restriction release requirements of this organization and this state, the gift may become unrestricted and the balance of the gift (including any accumulated interest) may be utilized as an unrestricted gift.

I/We understand and agree to the terms and conditions defined in this organization’s policies and/or bylaws and represented in this release form.

Donor Signature: _____ Date: _____

Donor Signature: _____ Date: _____

Restriction Acceptance:

On behalf of Tree of Life Lutheran Church, the restriction has been accepted as offered and will be honored as defined by this organization’s policies and/or bylaws, and as represented by this release form.

Representative Name and Title: _____

Representative Signature: _____ Date: _____