

MY/OUR PROMISE

I/We, \_\_\_\_\_, wish to be part of Calgary’s future with a planned gift to the Tomorrow Fund, helping to ensure that future generations will also benefit from programs and initiatives that build a great city for all.

PROMISE DETAILS

I/We will provide for United Way in my/our estate or deferred giving plans through:

- ☐ Bequest in a Will or Living Trust
- ☐ Charitable Remainder Trust
- ☐ Gift of Securities
- ☐ Annuities
- ☐ Real Estate
- ☐ Life Insurance (existing or new)
- ☐ Gift of Policy
- ☐ United Way as Beneficiary
- ☐ Other \_\_\_\_\_

The estimated value of this planned gift is \_\_\_\_\_ (Optional and Confidential)

PURPOSE AND INVESTMENT DIRECTION

We may follow up with you to ensure that the purpose and investment direction of your gift are fully understood.

- ☐ My/Our gift should be used immediately to benefit the community.
- ☐ My/Our gift should be invested in the Tomorrow Fund to support future needs of the community:

☐ As an endowed (permanent) gift

☐ As a non-endowed gift

☐ United Way Board of Directors should determine how my gift can best be used to support the work of United Way

☐ I/We would like to have my gift support: \_\_\_\_\_

CELEBRATING YOUR PROMISE

We would like to recognize the generosity of your promise gift and ask you to consider the following:

- ☐ I/We would like to be recognized as Tomorrow Fund Promise Donors, and have my/our names published in annual reports and other Tomorrow Fund communications, and I/we consent to such publication.
- Please list my/our Promise Donor recognition name as follows: \_\_\_\_\_  
(ex. Bob Smith, Mr. and Mrs. Bob Smith, Ann and Bob Smith, the Smith Family, etc)
- ☐ I/We prefer to remain anonymous, but still wish to receive information and updates about the Tomorrow Fund (annual reports, event invitations).
- ☐ I/We prefer to remain anonymous and do not wish to receive future communications about planned gifts or the Tomorrow Fund.

CONTACT INFORMATION

1. Donor Signature \_\_\_\_\_

2. Donor Signature (if applicable) \_\_\_\_\_

Date of Birth (optional) \_\_\_\_\_

Date of Birth (optional) \_\_\_\_\_

Home Address \_\_\_\_\_ City/Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Primary Phone ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Name and contact information of your executor/lawyer/family member we may communicate with, when your gift is received, to ensure your intentions are carried out and to share details about the impact of your gift:

My preference for Tomorrow Fund communication is: ☐ Email ☐ Mail