

Bequest Confirmation Form

Thank you for considering supporting North York Women's Shelter while preparing your Last Will and Testament. It is through the generosity of people like you that we are able to continue the life-saving work happening at NYWS. Each year, over 100 women and their children seek refuge at the shelter. The house continues to operate at capacity; we very seldom have an open space. Our 24-hour crisis line continues to ring and each year we receive over 1000 crisis calls from women seeking support.

We know that there are many different reasons why someone may consider supporting the shelter, but regardless of the reason, the results are always the same: ensuring a place of safety, support and empowerment is available to women and their children when escaping abuse and violence.

Please take a moment to complete this form so that we can ensure you receive appropriate recognition and ongoing information on our Legacy Program.

Name:			
Spouse/Partner:			
City:	Province:	Postal Code:	
Home Phone:		Vork Phone:	
Email:			
public recognition, such as a f your name as a member of ou The name(s) on an	future donor wall at the r Legacy group. by listings should read a	shelter. With your pe	Annual Report and other forms or sermission, we would like to include
☐ I wish to remain an	onymous		
Designating Your Gift			
☐ Shelter Empowerment Fund	d		
			ess any urgent or timely matters out the day-to-day operations of
☐ Shelter Improvement Fund			
The Shelter Improvement Fun	d angurae that NVMS c	ean maintain and impr	ove a safe and comfortable refug

The Shelter Improvement Fund ensures that NYWS can maintain and improve a safe and comfortable refuge for women and children. Your support for this fund will ensure that there is always a place for women and children fleeing violence and abuse.



I/We confirm the following planned gift to NYWS:		
■ Bequest in my will in the amount of \$	or	% of the residue
■ Beneficiary of a life insurance policy with a value of \$		
■ Beneficiary of % of my RRIF/RRSP proceed		
The above planned gift(s) are in honour/memory of:		
Please tell us about your connection to North York Wom	en's Shelte	,
Donor's Signature:	Dat	e:
Joint Donor's Signature:	Dat	e:

This form can be returned by confidential fax to: (416) 638-9557

Or by mail: North York Women's Shelter 20 De Boers Drive, Suite 333 Toronto ON M3J 0H1

Should you have any questions or wish to discuss your gift or recognition options, please contact Michelle Johnson, Manager of Development and Communications, at (416) 638-7335 x 233, or email michelle@nyws.ca. All communications will remain confidential.