

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: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Email: _____

As a tribute to our legacy donors, we publish acknowledgement in our Annual Report and other forms of public recognition, such as a future donor wall at the shelter. With your permission, we would like to include your name as a member of our Legacy group.

The name(s) on any listings should read as follows:

I wish to remain anonymous

Designating Your Gift

Shelter Empowerment Fund

The Shelter Empowerment Fund provides NYWS with the flexibility to address any urgent or timely matters at the shelter. Your support for this fund ensures that we are able to carry out the day-to-day operations of the shelter.

Shelter Improvement Fund

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 Women’s Shelter

Donor’s Signature: _____ Date: _____

Joint Donor’s Signature: _____ Date: _____

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

Or by mail:
 North York Women’s Shelter
 940 Sheppard Ave West
 Toronto ON M3H 2T6

Should you have any questions or wish to discuss your gift or recognition options, please contact Lindsay Sweeney-Hockin, Director of Development, at (416) 638-7335 x 115, or email lindsay@nyws.ca. All communications will remain confidential.