



Planning Your Legacy: Commitment Form

Thank you for considering the Cape Breton Regional Hospital Foundation in your plans of leaving a legacy. We are grateful to be considered in the important decisions that you are making. Knowing that you intend to leave a gift in your will helps us plan into the future to ensure proper intentions of your gift. Know that we keep all information provided to us confidential.

Name: _____

Address: _____

Phone Number: _____

Email: _____

Check one of the following:

- I have named the Cape Breton Regional Hospital Foundation in my will or estate plan.
- I would consider leaving a gift in my will or estate plan to the Cape Breton Regional Hospital Foundation.
- I would like more information about considering the Cape Breton Regional Hospital Foundation in my will or Estate.

If you have already named the Cape Breton Regional Hospital Foundation in your will or are planning to do so and wish to share more details with us, please indicate which of the following applies to you below:

- I will be leaving ____% percent of my estate after all other bequests and expenses have been paid
- I will be leaving a specific dollar amount. \$ _____
- Other _____

Our team would love to hear from you. Please return this form back to us confidentially by mail, email or fax:

45 Weatherbee Road, Suite 209, Sydney, NS B3M 0A1, foundation.cb@nshealth.ca, Fax number: 902-567-7916

Learn more about leaving your legacy with the Cape Breton Regional Hospital Foundation by visiting www.cbrhfoundation.ca/planned-giving/.