

*This form serves to inform Calgary Public Library Foundation of your intention to make a legacy gift and to help ensure that Calgary Public Library Foundation can honor your wishes. This form is not legally binding and will be kept confidential. We encourage you to seek the advice of professional estate planners and/or financial advisors before making charitable giving decisions.*

## **CONTACT INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Primary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## **MY GIFT**

I, \_\_\_\_\_, wish to support Calgary Public Library Foundation's future by providing a legacy gift. My gift will help ensure that long-term funding is available to support our community through the valuable, barrier-free educational and cultural opportunities that Calgary Public Library provides to all.

## **GIFT VALUE**

The estimated value of this legacy gift is: \$ \_\_\_\_\_

## **GIFT DETAILS**

I will provide for Calgary Public Library Foundation in my estate or deferred giving plans through:

- Bequest in a Will or Living Trust
- Gift of Securities
- Life Insurance Policy (*existing or new with Calgary Public Library Foundation noted as Beneficiary*)
- Retirement Plan (RRSP, RRIF) Beneficiary
- Open Investment Account (*example: TFSA*)
- Real Estate
- Other: \_\_\_\_\_

## GIFT DESIGNATION

If you wish to distribute your gift among multiple areas, please note they will be distributed equally, unless otherwise indicated.

\_\_\_ % Epilogue Fund (*supports highest priority needs of the Library*)

\_\_\_ % Collections

\_\_\_ % Early Learning

\_\_\_ % Other: \_\_\_\_\_

I want to be contacted about endowing my gift.

## RECOGNITION PREFERENCES

When you make the generous decision to leave a gift in your will to Calgary Public Library Foundation, you are also invited to become a member of our exclusive Epilogue Society — a forward-thinking group of donors that are inspiring our future. We kindly ask you to consider the following:

[ **epilogue society** ]  
*Plan your future.  
Inspire ours.*

- I would like to join the Epilogue Society and receive invitations to special events, and information and updates on a regular basis about the Calgary Public Library.
- I am open to sharing my donor story to support the Library Foundation's fundraising efforts.
- I prefer to remain anonymous and do not wish to receive any future communications about the Epilogue Society.

## SIGNATURE

I confirm that the above information is true and accurate and reflects my wishes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PLEASE RETURN THIS FORM TO:

Calgary Public Library Foundation  
800 3 Street SE, Calgary, AB T2G 2E7  
P 403 221 2002 E [info@libraryfoundation.ca](mailto:info@libraryfoundation.ca)

*To learn more about Calgary Public Library  
Foundation and view sample wording, please visit  
[www.libraryfoundation.ca/legacy](http://www.libraryfoundation.ca/legacy)*