

Agreement of Confidentiality: Your information will be kept strictly confidential with Tohono Chul. Please provide only the information that you choose.

I/We would like to support the mission of Tohono Chul with a legacy gift and I/we have: (*Please check all that apply*)

□ Revocable Bequest

Included a bequest for Tohono Chul in my/our will or living trust. I/We anticipate that the approximate value of my/our bequest(s) will be \$_____.

□ Revocable Beneficiary Designation

Included Tohono Chul as a beneficiary of an asset. The asset that Tohono Chul will benefit from is:

- Retirement Asset(s) (e.g. IRA, 401k, 403b, pension, etc.)
- \Box Life Insurance policy(ies)
- □ Home(s)
- \Box Other Asset(s)

I/We anticipate that the approximate value of my/our beneficiary designation will be \$_____.

□ Irrevocable Beneficiary Designation

____.

Included Tohono Chul as a beneficiary of a charitable trust.

I/We anticipate that the approximate value of my/our remainder trust(s) will be

\$_

Your Name(s)

FIRST	M.I. LAST		FIRST	M.I.	LAST	
TITLE			TITLE			
ADDRESS			ADDRESS			
CITY	STATE	ZIP CODE	CITY		STATE	ZIP CODE
TELEPHONE ()			TELEPHONE ()			
EMAIL (optional)			EMAIL (optional)			

7366 NORTH PASEO DEL NORTE, TUCSON, AZ 85704 • TOHONOCHULPARK.ORG • P 520.742.6455 • F 520.797.121

Name of Executor of Trustee

TITLE	FIRST	M.I.	LAST	
ADDRESS	CITY		STATE	ZIP CODE
TELEPHONE ()	EMAIL (optional)			

I/We would like to be members of the Wilson Legacy Society.

DATED:	DAY / MONTH / YEAR	NAME:
		SIGNATURE:
DATED:	DAY / MONTH / YEAR	NAME:
		SIGNATURE:

Please send completed form to: **Frank Vidal** Philanthropy Manager Tohono Chul 7366 N. Paseo Del Norte Tucson, AZ 85704

If you have any questions, please call Frank at (520) 742-6455 x 261, or email at fvidal@tohonochul.org