



OLTA Legacy Giving Confidential Statement of Intent

Contact Information

Name(s): _____

Address: _____ City _____

Prov.: _____ Postal Code: _____ Phone number: (____) _____

Email: _____ I give OLTA permission to contact me by email

Your Legacy

The nature of my/our legacy gift is as follows:

- My/our will contains a bequest of \$_____ or _____% of the residue of my/our estate
- I/we have named the Ontario Land Trust Alliance as the:
 - Beneficiary of a (circle one) life insurance policy / RRSP / RRIF in the amount of \$_____
 - Owner and beneficiary of a life insurance policy in the amount of \$_____

Gift Recognition

We would love to recognize your generosity in our publications. *Please note that the nature and the amount of the gift will remain confidential.*

- I/we agree to be recognized as:

- I/we prefer to remain anonymous

Kindly return this form by mail to:

Ontario Land Trust Alliance

10 Adelaide St East W, Suite 401

Toronto, ON M5C 1J3

P. 416.588.658