



## Legacy Response Form

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone (optional) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ **I/We plan to make a Legacy Gift through** \_\_\_\_\_ will \_\_\_\_\_ retirement plan \_\_\_\_\_ other

\_\_\_\_\_ **I/We would like more information** on making a Legacy Gift through \_\_\_\_\_ will \_\_\_\_\_ retirement plan \_\_\_\_\_ other

\_\_\_\_\_ **I/We have already made arrangements** to make a Legacy Gift through \_\_\_\_\_ will \_\_\_\_\_ retirement plan \_\_\_\_\_ other

**For more information, contact Rod Christian, Director of Individual Giving and Partnerships at 585-423-9700 ext. 305 or [rchristian@gildasclubrochester.org](mailto:rchristian@gildasclubrochester.org). Mail to: Gilda's Club Rochester, 255 Alexander Street, Rochester, NY 14607.**

**THANK YOU!**