Special Olympics New York Legacy Gift Declaration

I/We hereby declare that I/we have included a gift to Special Olympics New York in my/our:

* Will
* Living Trust
* Retirement Plan
* Life Insurance Policy
* Other

Gift is to be use for:

* Where it is needed most
* Young Athletes
* Healthy Athletes
* Unified Sports
* Other

Amount of gift – For long-term planning purposes only, the estimated current value of the gift is:

Plan specifies dollar amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Plan specifies percentage: \_\_\_\_ % of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This is not a legally binding commitment and I/we may choose to add, subtract, or revoke this planned gift at any time, at my/our sole discretion.

Name

Name of Spouse (if applicable)

Address

Phone

Email

Date

Signature

Signature of Spouse (if applicable)

Please return this form to: Director of Development, Individual Giving, Special Olympics New York, 94 New Karner Road, Suite 208, Albany, NY 12203