

Build a Legacy - Request Information

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Title: ☐ Miss ☐ Mr. □ Ms ☐ Mrs. ☐ Mr. and Mrs □ Dr. Phone Number: Email: Full Name: Date of Birth: YY/M/D City: Province: Postal Code: Please send me information on: ☐ Including March of Dimes in my Will □ RRSP/RRIF Funds ☐ Gifts of Life Insurance □ Appreciated Securities ☐ Charitable Gift Annuities ☐ Gifts of Real Estate, ☐ Charitable Remainder Trusts (CRT) Please mail or fax to:

Please mail or fax to: Planned Giving Department March of Dimes 10 Overlea Blvd, Toronto ON M4H 1A4

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