



MY LEGACY GIFT

Toronto Dance Theatre is grateful for your generosity and commitment to our mission. We want to ensure that our records accurately represent your intentions and cherish your wish to leave your legacy with TDT. Please note you should seek legal counseling for all estate planning.

First Name:Address:Prov:Phone:		
	As an expression of my love for dance, I h	nave included TDT in my: (please check all that apply)
	□ Will	☐ Life Insurance Policy
□ RRSP/RRIF/TSFA	Other:	
	n of \$ or (all or % ance Theatre, for the purpose of supporting its highes	
Please indicate how you would like yo	ur name(s) to be listed:	
	f my current plans. I understand that I may modify orm is not a legal obligation binding on me or my	
Signature(s):	Date:	

Please mail form to:
Jessica Whitford, Managing Director
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Email: jessica@tdt.org

Phone: 416-967-1365, x125