

CALVARY FUND  
1740 EASTCHESTER ROAD  
BRONX, NY 10461

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

BEST TIME TO CALL \_\_\_\_\_

EMAIL \_\_\_\_\_

FAX \_\_\_\_\_

- I HAVE INCLUDED A BEQUEST OR OTHER DEFERRED GIFT TO CALVARY HOSPITAL IN MY ESTATE PLAN. I WOULD LIKE TO BE A MEMBER OF THE SOCIETY OF 1899.
- PLEASE LIST ME AS \_\_\_\_\_
- I PREFER TO REMAIN ANONYMOUS
- I AM CONSIDERING INCLUDING A GIFT IN MY PLANNING. PLEASE SEND ME INFORMATION ON:
- A BEQUEST TO CALVARY HOSPITAL
- GIFTS THAT PAY ME INCOME FOR LIFE
- A GIFT OF A LIFE INSURANCE POLICY
- A BEQUEST FROM MY RETIREMENT PLAN
- A GIFT OF REAL ESTATE
- OTHER