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In the Jewish tradition of sharing our blessings

I/We take satisfaction in declaring my/our intent to help Camp Laurelwood provide for the needs of future generations of Jewish children.

I/We have made a provision

I/We will make a provision

to include Camp Laurelwood as beneficiary in:

A bequest in my/our will

A life insurance gift

A charitable gift annuity

An IRA or pension plan

Through a trust fund and/or foundation

Gift of real estate, securities or other property

Other _____

Name _____

Address _____

City _____

State _____ Zip _____

Phone (Home) _____

Phone (Business) _____

Phone (Cell) _____

Email _____

Signature(s) _____ Date _____

Donor Recognition

Donor requests anonymity

Donor wishes to be acknowledged publicly by Camp Laurelwood for his or her Legacy commitment

Print your name(s) exactly as you wish to be listed in publications or on permanent donor lists of Camp Laurelwood's Legacy Society

Please mail to:
 Rob Goldfarb, Camp Laurelwood, 463 Summer Hill Road, Madison, CT 06443

