



### Open Arms Care Foundation Legacy Gift

In recognition of my strong belief and confidence in the work of Open Arms Care,

I, \_\_\_\_\_, confirm that I have taken steps to make a bequest or other planned gift to Open Arms Care Foundation. I understand that all information listed on this application will be kept in strict confidence.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

I have made the following type of planned gift to Open Arms Care:

- Gift through Will
- Charitable Lead Trust
- Life Insurance Policy
- Gift through Living Trust
- Charitable Remainder Trust
- Individual Retirement Policy

Estimated value of bequest or other planned gift: \$ \_\_\_\_\_

I would like my gift to be designated for:

- Where Needed Most
- Chattanooga Operations
- Knoxville Operations
- Memphis Operations
- Nashville Operations

In memory of \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Please return form to:  
Open Arms Care Foundation  
6 Cadillac Drive, Suite 350  
Brentwood, TN 37027