



YES! I WANT TO SUPPORT NEW HORIZONS BY MAKING A PLANNED GIFT.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

For recognition please list my name as: _____

I wish to remain anonymous.

The source of my gift is: (please check all that apply)

- Will
- Retirement Fund
- Securities
- Personal Property
- Real Estate
- Donor Advised Fund (name of institution : _____)
- Life Insurance Policy
- Annuity Contract
- Trust/Unitrust
- Cash
- Pooled Income Fund

My gift is: revocable irrevocable

Donor Signature: _____

New Horizons Representative Signature: _____

Date: _____

For further details, contact Holly Rasey, Senior Director, Development and Communications, at 818.221.0649 or hrasey@newhorizons-sfv.org

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