

# JP BICKELL MEMBERSHIP FORM

## Thank you for your future gift commitment to SickKids.

Donors who confirm a future gift are invited to join our J.P. Bickell Society. The Society was named after John Paris Bickell - a man who believed in the future of SickKids. Through his will, he established the J.P. Bickell Foundation and directed half of the annual income to SickKids. This gift helped create The Hospital for Sick Children Research Institute in 1954, which is now the largest child health research institute in Canada.

## J.P. Bickell Society members are entitled to:

- Recognition in the Hospital in the Donor Hall of Honour, with naming of your choice
- Invitations to events at the Hospital
- Receive special communications from SickKids

You also have the option to remain anonymous in terms of public recognition while still receiving invitations to events and our communications. The choice is yours. Below is a confidential form which you may complete to indicate your preferences.

- I/We accept the Foundation's invitation to be a member of the J.P. Bickell Society.  
The name(s) on any listings should read as follows:

\_\_\_\_\_

OR

The planned gift(s) are in honour of: \_\_\_\_\_

- I accept membership, but wish to remain anonymous in terms of public recognition

## Please provide the following information:

MR  MRS  MS  MISS  DR  MR  MRS  MS  MISS  DR

\_\_\_\_\_  
Name Name of spouse (if applicable)

\_\_\_\_\_  
Address City

\_\_\_\_\_  
Province/State Country Postal/Zip Code

\_\_\_\_\_  
Phone # Email

What is your birthday?  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
day month year

What is your spouse's birthday? (if applicable)  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
day month year

## I/We confirm the following planned gift to SickKids Foundation: (Optional)

- Bequest in my/our will(s) in the amount of \$ \_\_\_\_\_ or \_\_\_\_\_ % of the residue
- Beneficiary of a life insurance policy with a value of \$ \_\_\_\_\_
- Beneficiary of \_\_\_\_\_ % of my RRIF/RRSP proceeds

