

TRAILS
P.O. Box 1836, Port Angeles, WA 98362 info@olympicdiscoverytrail.org
OlympicDiscoveryTrail.org



Preserve the OLYMPIC DISCOVERY TRAIL With your LEGACY GIFT

To formalize your bequest or other estate gift to benefit the Olympic Peninsula Trail and the work by the Peninsula Trails Coalition to complete it, we need written documentation of your intention. It is useful, but not mandatory, for us to receive a copy of the relevant section(s) of your will. Please include only the information that you are comfortable sharing which will be kept confidential. We will recognize your legacy gift only if you provide approval to do so.

DONOR INFORMATION		
Name(s):		
Address:		
City:	State:	Zip:
Birthday:(Mo./Yr.):	Spouse Birthday:	
Tel: (Home):		
Email:		
TRUSTEE OR EXECUTOR INFORM	IATION	
Name(s):		
Address:		7.
	State:	Zıp:
Tel:		
Email:		
OLYMPIC DISCOVERY TRAIL LEGA	ACY TEAM INFORMATION	
Me are is pleased to recognize you as a man	when of the Deningula Trails Coa	lition "Loggey
We are is pleased to recognize you as a mer Team" . in our publications. Please indicate		
following:	, can 1 coo ₀ p. c.c. cc c, cc	6 0 0 0
Please list my/our name(s) as:		
lacksquare We wish to be anonymous. (One of the n		
egacy gifts is to periodically profile our Legacy T matters to them and to our communities.)	eam donors, sharing with others the sto	ory of why the trail
I/We would be honored to be profiled in	n trail publications.	



The Peninsula Trails Coalition is named as a beneficiary of:

(check all boxes that apply)

(If willing to share the information, ple	case include the current estimated value of the asset.)
☐ Sections of my will or trust _	
☐ Retirement Account/Plan* _	
☐ Life Insurance Policy	
☐ Investment or Financial Account [*]	
Other asset (s)*	
you designate the Peninsula Trails Coalition as	ciaries when the account holder is deceased. Therefore, if s a beneficiary of any account not covered by your will you gnation and able to claim the assets when the time comes.
DESIGNATION	
☐ I request that funds be used to su	ipport critical Olympic Discovery Trail needs.
☐ Additional information or direction	ons regarding my bequest that the Peninsula
SIGNATURE*:	DATE:
SIGNATURE*:	DATE:
*Note: This form is non-binding.	
(anonymously) the total number of intended e	and for sharing your plans with us. We do track estate gifts and this information helps us attract additional ition about your gift you are helping to leverage even more
QUESTIONS? Contact John at 360-477-40	081, PTCtreasurer@olympicdiscoverytrail.org
PLEASE RETURN THIS FORM TO:	John Dolansky, Treasurer Peninsula Trails Coalition PO Box 1836

Port Angeles, WA 98362