

E.B. “Jon” Morrison Roll of Honor Membership

Because I care deeply about children with disabilities and special education needs and their families, I have included the Children’s Care Foundation in my estate plan. I understand that this makes me eligible for membership in the E.B. “Jon” Morrison Roll of Honor at Children’s Care Hospital and School.

- I have included the Children’s Care Foundation in my estate plan, and prefer not to share the specifics at this time.
- I have included the Children’s Care Foundation in my will for a specific bequest of \$_____.
- I have included the Children’s Care Foundation in my will for _____% of my estate.
- I have included the Children’s Care Foundation in my will for _____% of the residue of my estate.
- I have provided for the Children’s Care Foundation in a trust administered by _____, in the amount of \$_____.
- I have listed the Children’s Care Foundation as a beneficiary of my life insurance policy or retirement plan, in the amount of \$_____.

Signature Date

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Birth date _____



CHILDREN’S CARE HOSPITAL & SCHOOL

For Children with Special Needs and Their Families

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