

Children's Legacy Advisor application



Children's Healthcare of Atlanta Legacy Advisors share a commitment to advancing philanthropy by educating their clients and colleagues about tax-wise and values-based planning. By educating others on the benefits of charitable planning, Children's Legacy Advisors hope to inspire a new community of philanthropists who are able to address their needs for financial security and family legacy while investing in causes they care about most. Children's Legacy Advisors assist donors in the creation of charitable plans that endeavor to represent the best alignment of donors' hearts, minds and wallets. Through cutting-edge training in charitable planning and their commitment to advancing philanthropy, Children's Legacy Advisors are important partners in building a stronger future for tomorrow's children.

Title: Mr. Mrs. Ms.

Full name: _____ Prefers to be called: _____
PREFERRED FORMAT FOR PRINT

Company name: _____ Professional title: _____

Preferred mailing address: Business Home

Business mailing address: _____

City: _____ State: _____ Zip: _____

Home mailing address: _____

City: _____ State: _____ Zip: _____

Preferred phone: Cell Work Other

Cell: _____ Work: _____ Other: _____

Email: _____

I understand that as a Children's Legacy Advisor, I will:

- Attend an orientation tour to learn more about the Children's mission and the latest advancements in pediatric medicine.
- Commit to continuing education in philanthropic planning.
- Attend at least one Children's networking event each year (e.g., Legacy Circle Luncheon, Hope's Circle, Will's Club or a Friends event).
- Serve as a trusted resource in my area of specialization to the Children's Foundation staff.
- Uphold my professional standards of conduct while demonstrating my commitment to philanthropic planning.
- Act as an ambassador in charitable planning outreach activities. Please check one or more of the volunteer opportunities below that you are willing to fulfill:
 - Participate as a speaker at continuing education events
 - Recruit new Children's Legacy Advisors
 - Sponsor or host activities for Children's Legacy Advisors

I understand that the Children's Healthcare of Atlanta Foundation respects the needs of legacy professionals to be objective, to advise their clients from an unbiased platform and to represent their clients' very best interests, regardless of whether the plans include a significant gift to Children's Healthcare of Atlanta.

Signed: _____ Date: _____

Thank you for continuing the legacy and helping to secure the future of Children's for generations to come.

Please email, mail, call or fax Mary McCormack, Senior Director, Legacy Giving
Children's Healthcare of Atlanta Foundation, Park North, 1577 Northeast Expressway, Atlanta, GA 30329



Legal Name: Children's Healthcare of Atlanta Foundation; Tax t. Number: #58-1710601; Incorporated in: Atlanta, GA