



Name/s _____

Address _____

City/ St/ Zip _____

Business phone _____

Home Phone _____

E-mail _____

**Welcome to the Canine Companions for Independence
Heritage Society!**

You may publish my name (our names) as follows: (please print)

Signed _____ Date _____

Check only if applicable:

Please do not publish my name (our names):

Signed _____ Date _____

Share my/our intent only with the CCI office in my/our region

Signed _____ Date _____

Heritage Society

CCI created this society to honor those who have remembered the organization in their estate plans through thoughtful bequests and other planned gifts. Those who do allow us to use their names will be recognized in the CCI Annual Report.

All members receive a commemorative award.

*Please send to:
Planned Giving Office
Canine Companions for Independence National Office
PO Box 446 Santa Rosa CA 95402-0446*

pginfo@cci.org