Rooted in Dear Jack Foundation's core values, the Legacy Circle fosters and encourages a community of giving. The Legacy Circle is critical to the continued success of the Dear Jack Foundation. It is your support that drives the Dear Jack Foundation's ability to improve the lives of so many young adult cancer patients, survivors and their families. You're invited to invest in the legacy of Dear Jack today.

dearjackfoundation.org
Become a Part of Dear Jack's Legacy

Invest in the future of the Dear Jack mission at a giving level that's right for you and become a valued member of the Legacy Circle.

Friends of Dear Jack
$1,000 - $2,499

Ambassador for Compassion
$2,500 - $4,999

Partner in Change
$5,000 - $9,999

Advocate for Hope
$10,000+

The Impact of Your Legacy Circle Membership

- **hope**
  Up to one LifeList program participant funded

- **guidance**
  Up to one Breathe Now retreat couple funded to participate

- **community**
  Up to one year The Breathe Series funded

- **love**
  Five or more LifeList program participants funded
Make a Commitment to the Future of Dear Jack Today

Legacy Circle Giving Incentives:
First year giving incentives are based on annual giving (January - December) at your personal giving level defined above and distributed quarterly.

Friend of Dear Jack
Dear Jack Foundation sticker & pen

Ambassador for Compassion
Dear Jack Foundation t-shirt

Partner in Change
Dear Jack Foundation branded Miir coffee mug

Advocate for Hope
Dear Jack Foundation branded Miir water bottle + 2 VIP tickets to the annual DJF Benefit

*No substitutions will be granted.

Ways to Give:
Online at: dearjackfoundation.org/donate

Complete the form on the next page and mail form with a check to:
1840B W. Littleton Blvd
Littleton, CO 80120

Please make checks payable to Dear Jack Foundation
Dear Jack Foundation

A Powerful Voice in the Fight Against Adolescent and Young Adult Cancer

Legacy Circle Pledge Form

Donor Information

First Name ___________________________ Last Name ___________________________

Email Address ___________________________ Phone Number ___________________________

Mailing Address ___________________________

City ___________________________ State, Zip Code ___________________________

Pledge Information

Pledge Amount: ___________________________

Pledge Type:
☐ Annual Pledge
☐ Monthly Pledge
☐ One Time Donation

Pledge Length:
☐ One Year
☐ 5 Years
☐ 10 Years
☐ Other: ___________________________

Mail printed form with a check to:
1840B W. Littleton Blvd
Littleton, CO 80120

Please make checks payable to Dear Jack Foundation

Questions?
Reach out to us at info@dearjackfoundation.org