

**CONFIDENTIAL**



If you wish to let us know that you have included CMRI in your Will, please take a few minutes to complete the form below

Title:                      First Name:    Surname:  
Address:  
Postcode:    Email:

- I am letting you know that I have included CMRI in my Will
- I would like to be kept up to date with your research
- I would like to receive invitations to special CMRI events
- I prefer that you do not send updates about your research
- I prefer not to receive invitations to special events

Please return this completed form to us via mail at:

Children's Medical Research Institute  
Reply Paid 71005 (no stamp required)  
WENTWORTHVILLE NSW 2145

or via email at [bequests@cmri.org.au](mailto:bequests@cmri.org.au)

## Thank you for making a very special gift.

If you have any questions about this form or leaving a gift in your will, please contact us directly.



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