



HEARTS OF GOLD

RETIREE QUALIFIED PARTICIPANT FORM

We're there and we care

PLEASE COMPLETE THIS FORM IN ORDER FOR YOUR REQUEST TO BE PROCESSED

| | | | |
|-------------|--------------|------------------|-------|
| Print Name: | | Cell #: | |
| City PR#: | DOB: | Retirement Date: | |
| Amount: | Annual \$130 | Monthly \$11 | Other |
| Email : | | | |
| Signature: | | Date: | |

PLEASE NOTE:

1. In order to be considered a participant in good standing and remain eligible to receive assistance, Hearts of Gold Foundation must receive at a minimum \$130 annually or \$11 monthly from each participating retiree. Retirees may pre-pay any amount at any time.
2. Direct payments to the Hearts of Gold Foundation shall be arranged through the retiree's financial institution.
3. Retirees must contribute a minimum of 3 months (90 days) from the date of first contribution before they are eligible to apply for benefits.
4. Retirees are solely responsible to confirm regularly that contributions are being made. Hearts of Gold is not responsible for registering, confirming, or maintaining retiree contributions to the Hearts of Gold Foundation.
5. Applications and instructions to apply for benefits can be found on the Hearts of Gold website at www.tucsonheartsofgold.org
6. Return this completed form to info@tucsonheartsofgold.org.
7. For questions, concerns, or compliments, please contact the Hearts of Gold Executive Director, retired Lieutenant Jamie Brady at info@tucsonheartsofgold.org or 520-465-0375

Processed By: HoG :

Date:

www.tucsonheartsofgold.org