

SALONS HONORING THOSE WHO SERVED. DONATION FORM.



Thank you for your participation in the 2015 Shear Appreciation: Salons Honoring Those Who Served. Please complete the form below.

Name: _____

Address: _____

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SHEAR APPRECIATION

We did the following activities for our Shear Appreciation: Salons Honoring Those Who Served:

OUR TOTAL DONATION AMOUNT IS: \$ _____

PAYMENT INFORMATION:

Check

Visa

MasterCard

Discover

American Express

Credit Card Number: _____ Exp Date: _____ CCV: _____

Signature: _____

Please make checks payable to Shear
Appreciation benefiting WWP

Total donation to Shear Appreciation: _____

PLEASE RETURN YOUR COMPLETED DONATION FORM TO:

Paul Brown Hawaii, 3200 Southwest Freeway, Suite 3300, Houston, TX 77027
or info@shearappreciation.org

FOR MORE INFORMATION, PLEASE VISIT WWW.PAULBROWNHAWAII.COM