

"Covering Young Heads To Heal Young Hearts"TM

HAIR DONATION

- Hair must be a minimum of 8 inches,
- Clean, DRY, and in a ponytail(s) OR braid.
- Place your **DRY** hair donation into a zip lock bag and then in any mailing envelope.

Please send this completed form along with your hair donation to:

Children With Hair Loss 12776 Dixie Hwy • S. Rockwood, MI 48179

*A certificate of appreciation will be e-mailed or mailed to you. Please allow up to 10 weeks to receive your certificate. (Print Clearly)

Name of Donor:
Email: Phone: Please provide your Email allowing us to send your certificate faster, save money and help more kids • International donors receive certificate by Email
Street Address: Apt/Suite:
City:State/Province/RegionZip/Postal CodeCountry
(Optional) Print my certificate In Memory Of In Honor Of:
Any Comments?? Did you include a picture? Do we have your permission to publish it? Signature:
Like Us on Facebook.com/CWHLMI · Follow Us on Twitter.com/CWHL_ORG and send us a photo and/or comment!!!
We appreciate your HAIR DONATION , but there is still a HUGE COST to have a hair replacement made. Please consider contributing a tax deductible donation TODAY?
I HAVE ENCLOSED A \$DONATION TO HELP PAY FOR A CHILD'S HAIR REPLACEMENT I HAVE ENCLOSED A \$7 DONATION TO PAY FOR A HAT TO BE GIVEN TO A RECIPIENT OF CWHL
I Donated My Hair To Children With Hair Loss I HAVE ENCLOSED A \$30 DONATION TO RECEIVE A T-SHIRT AND ADJUSTABLE HEART BRACELET I Donated My Hair To Children With Hair Loss I HAVE ENCLOSED A \$25 DONATION TO RECEIVE A T-SHIRT AND HAIR DONATION PATCH (Please select size and color of t-shirt)
SIZE:Youth Medium (Fits up to child size 8)Youth Large (Fits up to childe size 14) Adult: SM MD LG XL XXL XXXL XXXXL COLOR (Select One) BLACK t-shirt PINK t-shirt
*If you live outside the United States your order must be placed through our website www.ChildrenWithHairLoss.us Checks may be made payable to: Children With Hair Loss To have your donation charged to your credit card, please fill in your information below:
Payment Type: Visa Master Card Discover American Express
Credit Card Number: Exp Date:
Name as it appears on card: 3 Digit Code on Back:
Signature of Cardholder: