

## Hair Donation Form

Please complete, and send this form with your hair donation in a zip lock bag and then enclose in any mailing envelope (You may remain anonymous if you wish). Please mail your donation to the address below.

Please print legibly so we can send you a certificate.

Your Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt./Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Please visit us at [www.angelhairfoundation.org](http://www.angelhairfoundation.org)

\_\_\_\_\_ I would like to donate \$10.00 to purchase a satin pillow case for a child with hair loss.

**Angel Hair Foundation**

**2783 Suncrest Ave**

**Eugene, OR 97405**

**(541)344-5135**

**Email: [angelhairfoundation@yahoo.com](mailto:angelhairfoundation@yahoo.com)**

**Angel Hair Foundation is a 501(c)(3) nonprofit organization**

**20-5610889**