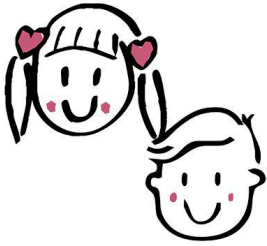


Locks of Love



SALON REGISTRATION FORM

ALL SECTIONS MUST BE COMPLETE AND LEGIBLE SO THAT YOUR SALON CAN BE REGISTERED. PLEASE CONTACT VOLUNTEER@LOCKSOFLove.ORG IF YOU DO NOT RECEIVE AN EMAIL WITHIN 1 WEEK.

Today's Date: _____

Name of Salon: _____

Multiple locations: NO YES : please send _____ decals

Salon Contact Person: _____

E-Mail: _____

Phone: _____ **Fax:** _____

Address: _____ **Apt:** _____

City, State: _____ **Zip:** _____

- I agree to offer a free blunt cut for donations of 10" or more to Locks of Love.
- I agree to send each hair donation and a completed donation form to Locks of Love.
 - Donation forms may be faxed to 561.833.7962 for prompt acknowledgement.
 - Hair may be sent later without the form.
 - Donors may ship their own hair & donation form if they wish.
 - Donors might want to use a service that provides a tracking number for the package.
- I agree to send financial contributions to Locks of Love promptly with donor information.
- I agree to post the Locks of Love decal to show that my salon is a participating salon.
- I understand that I have permission to use the Locks of Love name and logo in advertisements, flyers, and on my salon's official web site as long as my salon continues to participate.

SIGNATURE _____ DATE _____

PRINTED NAME _____

TITLE _____

IF YOU WISH TO SCHEDULE AN EVENT PLEASE COMPLETE AN EVENT REGISTRATION FORM.