



## Donations

Please have each donor complete and mail to the NCA Cares Fund

### CONTACT INFORMATION

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a salon and/or spa professional?  Yes  No

Would you like a receipt emailed / mailed to you?  Yes  No

Note: The NCA Cares Fund is a 501(c)3 non-profit corporation. All donations are tax-deductible to the fullest extent of the law.

### DONATION INFORMATION:

Cash  Check  Credit Card Amount: \_\_\_\_\_  
(Please make checks payable to the NCA Cares Fund)

CREDIT CARD:  Visa  MasterCard  AMEX  Discover

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Security Code: \_\_\_\_\_ Signature: \_\_\_\_\_

Please return to:  
NCA Cares Fund  
15825 N. 71<sup>st</sup> Street, Suite 100  
Scottsdale, AZ 85254  
866.871.0656

Donate online at [www.ncacares.org/diningforchange](http://www.ncacares.org/diningforchange)