

**Dual Pricing Charity Program** 

<b>Business Name:</b>	

Business Owner Name:\_\_\_\_\_

Business Owner signature: \_\_\_\_\_

## **Charity of Choice**

Charity Name:		
Charity Address:		
City:	State:	
Zip:		
Charity Phone Number: _		
Charity Email Address:		

Charity Website: \_\_\_\_\_