



Fox Valley Animal Welfare League - Order Form

Name: _____

Billing Address: _____

City/State/Zip: _____

Primary Phone: _____

Email: _____



I would like to purchase _____ bracelets.
\$10 each

Each donation of \$10 goes into the P.A.L. (Prevent A Litter) fund that is used for spay/neuter.

\$ _____

Signature: _____

I authorize FVAWL to process my credit card in the amount indicated.

☐ VISA ☐ MasterCard ☐ Discover ☐ Payment Enclosed

Card:

Expires:

Security Code:

☐ One Time Charge

*Please send as a gift to:
(If different than above)*

Name: _____

Address: _____

City/State/Zip: _____

REMIT PAYMENT TO: FVAWL

11 JOHN STREET, SUITE B, NORTH AURORA, IL 60542, 630-800-2254, www.fvawl.org