



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

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

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

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

PH: \_\_\_\_\_

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

\_\_\_\_\_ I am able to attend and have ranked below the menu of services in order of priority. Services will be assigned on a first come first serve basis. We will accommodate requests as best we can. However, scheduling of services is subject to change. Services will start promptly at 5:00pm.

- \_\_\_\_\_ Haircut
- \_\_\_\_\_ Color
- \_\_\_\_\_ Psychic
- \_\_\_\_\_ Life Coach
- \_\_\_\_\_ Make up Artist



\_\_\_\_\_ I am unable to attend, but would like to sponsor a birth mother for \$50.00.

\_\_\_\_\_ I am unable to attend, but have enclosed a donation.

Mail Checks to: On Your Feet Foundation  
c/o Mary Beth Sommer  
1636 N. Wells #407  
Chicago, IL 60614

**Please respond by Thursday, February 25, 2010**