



COMPLETE THIS FORM TO BECOME A BONE-A-FIDE REWARDS RECIPIENT!



Name of Organization: _____

Contact Person and/or Fundraising Coordinator: _____

Mailing Address for Check: _____

Phone Number: _____

Website Link: _____

PRINT AND COMPLETE THIS FORM AND MAIL IT TO:

**JMT GLASSWORKS
 23354 ALEXANDER ROAD
 NORTH OLMSTED, OH 44070**

OR SIMPLY EMAIL THE INFORMATION TO INFO@JMTGLASSWORKS.COM

ANY QUESTIONS? CONTACT US AT (440) 734-1153