



# Recycling Coalition of WV, Inc.

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wvrecycles.org

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Designer Date of Birth: \_\_\_\_\_ Designer Name: \_\_\_\_\_

Designer Signature: \_\_\_\_\_ Date: November 21, 2020

Address: \_\_\_\_\_ Designer's Phone: \_\_\_\_\_

City, State, Zip \_\_\_\_\_  
IF MODEL IS UNDER 18

Model Name \_\_\_\_\_ Guardian Name: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: November 21, 2020

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

City, State, Zip \_\_\_\_\_ Email: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: November 21, 2020

Model Signature: \_\_\_\_\_ Model's Phone Number \_\_\_\_\_

Will you to donate your entry to be used to promote future ReFashion Shows? Yes No

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