

**My Favorite Charity**  
**Every Body Deserves a Massage Week Competition Entry Form**  
(Entries MUST be submitted by Friday, July 24<sup>th</sup>, 2009)

Name \_\_\_\_\_ Charity Name \_\_\_\_\_  
Charity Contact Name & Phone \_\_\_\_\_  
Charity Website/Email Address \_\_\_\_\_

Please describe (in 300 words or less) why this charity is important to you and why The Savannah School of Massage Therapy Training, Inc. should choose this charity to receive part of the proceeds from Every Body Deserves a Massage Week. (You may attach a separate sheet.)

**Send forms to [eddirector@ssomt.com](mailto:eddirector@ssomt.com) or FAX to (912) 691-2404.**