



New Moon Sharpening Form

service@newmoonscissors.com

tel: 618.531.3701

1. Scissor Information

Date Sent: _____ Scissor Quantity: _____

Additional Information (Optional): _____

2. Packaging Instructions

Fill out this form, and include in a box with scissors. No ENVELOPES PLEASE! Priority flat rate is best. PUT NAME AND CELL PHONE CONTACT on outside of box.

Send scissors to:

Harebone Shears
P.O. Box 372
Troy, IL 62294

3. Return Delivery and Contact Information

Name: _____ Salon/Business Name (Optional): _____

Street Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Cellphone: _____

4. Payment

Payments made after works completed. Cost is **\$13** per scissor, all styles.

Return shipping is **\$9** PayPal invoiced with guest debit or credit checkout.

Can process over the phone if needed. Call or text 618.531.3701.

For check payment or any questions contact service@newmoonscissors.com

PLEASE INCLUDE THIS FORM IN PACKAGE WITH SCISSORS