



Tattoo Order Form

A hip and painless way to show your school spirit! \$3 per sheet of 3 tattoos.

How many would you like? _____

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

email: _____

TOTAL PAYMENT ENCLOSED: _____

Send this form and payment to: Tattoos," c/o CACS, 1601 Turk Street, SF, CA 94115 or drop off in the office. Payment by cash or check only (checks payable to "CACCS").