

# ORDER FORM

NAME .....			DATE:     /     / .....		
STUDIO NAME .....			ORDER NUMBER: .....		
STUDIO ADDRESS (for delivery) .....					
CITY .....		STATE .....		POSTCODE .....	
PHONE .....		FAX .....		Does the studio stock Protat?	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	

CODE	ITEM DESCRIPTION	SIZE	QTY	ITEM COST	TOTAL

**PLEASE NOTE: ALL ITEMS SHOWN IN THE PROTAT TATTOO SUPPLIES CATALOGUE ARE SUBJECT TO GST**

## PAYMENT METHOD

- ☐ Credit Card
- ☐ Electronic Bank Transfer
- ☐ Sent Money Order
- ☐ PAYPAL
- ☐ C.O.D
- ☐ Other (provide details below)
- .....

If paying by Credit Card, please provide the following details:

☐ VISA    ☐ MASTERCARD

Card Holder's Name:

.....

Card Number:

.....

Expiry Date:     /     /

.....

Validation Number (last 3 digits on back of card)

.....

## DELIVERY

Please send my order by:

- ☐ AUSTRALIA POST
- ☐ EXPRESS POST
- ☐ FASTWAYS

Please refer to our catalogue for freight costs, or phone us.