DarkArts Splicing - Cam Resling Form

Name:				**Phone #**		
Address:				**Ship To Address:**		
				DarkArts Splicing		
				PO BOX 99900 JX 397 169 RPO DUNBAR VANCOUVER V6S 0E7		
Email:				Date Submitted:		
Total number of cams:				ORDER NUMBER#		
#	Brand and Type	Size	Style of sling	Nylon or Dyneema	Colour	

Customer Signature:

Staff Member Accepting Cams:

Date Customer Contacted for Pickup:

DO YOU MIND PICTURES OF YOUR CAMS POSTED ON THE DARKARTS SPLICING SOCIAL MEDIA?

YES ☐ NO ☐

WOULD YOU LIKE TO BE TAGGED, IF SO, WHAT IS YOUR INSTAGRAM USER NAME -