

# Business Card Order Form

graphics@tulaliptribes-nsn.gov  
360-716-5166

Name (as it is to appear on card)		Accreditation/Degree (optional)		Job title	
Street address		City		State	Zip
Phone number 1		Phone number 2 (optional)		Phone number 3 (optional)	
Email address		Entity <input type="checkbox"/> TTT <input type="checkbox"/> QCV		Department and/or division name	
Quantity of cards <input type="checkbox"/> 60 <input type="checkbox"/> 120 <input type="checkbox"/> 240 <input type="checkbox"/> Other:		Custom logo description, other instructions, comments, or questions			
Layout chosen (see below) <input type="checkbox"/> Option A <input type="checkbox"/> Option B <input type="checkbox"/> My department has a custom logo*					

\* If your department has a custom logo that does not include the Tulalip Tribes whale image, it will be centered on the back side of either layout option.

## LAYOUT OPTION A


**First LastName, Degree**  
Title

**Division Name (if needed)**

Street Address  
Tulalip, WA 98271

Desk 360-716-XXXX  
Fax 360-716-XXXX  
Cell 360-716-XXXX

sample@tulaliptribes-nsn.gov



**DEPARTMENT NAME**

## LAYOUT OPTION B

**First LastName, Degree**  
Title


.....

**Division Name (if needed)**

Street Address  
Tulalip, WA 98271

Desk 360-716-XXXX  
Fax 360-716-XXXX  
Cell 360-716-XXXX

sample@tulaliptribes-nsn.gov



**DEPARTMENT NAME**



QCV cards will use the QCV logo here