

**HOOT GIFT SHOP CONSIGNMENT FORM**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP \_\_\_\_\_

PHONE: \_\_\_\_\_

Received by \_\_\_\_\_ Sign In \_\_\_\_\_ Sign Out \_\_\_\_\_

ITEM #	DESCRIPTION	YOUR PRICE	HOOT 30%	SALE PRICE

Please complete 2 copies of this form and keep 1 for your records and return 1 to the consignment shop.