

CV Swim Team Picture Day

Photography by **Chuck Jaynes**
PHOTOGRAPHY

PLEASE PRINT CLEARLY

Client/Parent Information

Order #: _____

Client Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: Home _____ Mobile _____

Athlete Information

Athlete Name: _____ Age: _____ Boy Girl

Team Name: **CV Crocodiles**

Individual #: _____

Product Order Form

| Item | Opt * | Description | Qty | Price | Amount |
|------|-------|-------------|-----|-------|--------|
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* Use this column to indicate a special option for an item by entering the corresponding letter below

A = Use Alternate Athlete Name **T** = Use Team image

Alternate Athlete Name: _____

Payment

Subtotal: \$ _____

Method: Cash Check _____

(if applicable) Shipping: **PICKUP ONLY**

Notes: _____

Add'l Charge / Credit: \$ _____

Please make checks payable to CV Swim Team

Total: \$ _____