

Sports Portrait Photography

PLEASE PRINT CLEARLY

Parent/Clie	C	Order #:				
Client Name:						
Address:						
City, State, Zip:						
Email:						
Phone:	Home Mobile					
Athlete Info	ormation					
Athlete Name:		Age:	□ Воу	□ Girl		
Team Name:						
Group Name:		(if applicable)				
	TERMS AND CONDITIONS					
publication the use of	o/Photographer reserves the right to use images created under this a, or other purposes. The Client signing this agreement warrants that he the likeness of the person herein described in this manner. Negatives, property of this Studio/Photographer.	or she has actua	al authority to	o agree to		
beyond the deposit or liability sha media mali event the S	io/Photographer cannot perform this Agreement due to fire or other casus a control of the parties, or due to Photographer's illness or emergency, the reservation fee to the Client but shall have no further liability with respect all also apply in the event that photographic materials are damaged in profunction, lost in the mail, or otherwise lost or damaged without fault on the Studio/Photographer fails to perform for any other reason, the Studio/Photographer paid.	en the Photogra t to the Agreeme ocessing, lost the e part of the Pho	pher shall reent. This limit ough camer otographer. I	eturn any tation on a or other n the		
I have read and	understand the terms and conditions and agree to be bound by them.					
Client Signature	·	Date	:/_	_/		

- continued on back -



Athlete Name:				Individual #:			
				Action	n #:		
		Product Ord	ler Form				
Item	Opt *	Description	(Qty Price	e Amount		
		indicate a special option for an item by enter ate Athlete Name G = Use Group image		below			
Alterna	te Athlet	e Name:		_			
Payment			Subtotal:	\$			
Method:	□ Cash	☐ Check ☐ Credit / Debit	(if applica	able) Shipping:	\$		
Notes:			Add'l Ch	narge / Credit:	\$		

Please make checks payable to Chuck Jaynes Photography

Total: \$____