



ORDERS DUE ON PICTURE DAY
 SUNDAY, NOV 14th @ 10:00AM

PLAYER NAME (As it should appear on product- First & Last)

Player Number

PARENT OR GUARDIAN NAME

BILLING ADDRESS (REQUIRED)

CITY

STATE

ZIP CODE (REQUIRED)

PHONE

EMAIL (REQUIRED)

PACKAGE A
 1 MEMORY MATE, 1 8X10 INDIVIDUAL, 2 5X7 INDIVIDUAL,
 8 WALLETS, 1 BUTTON, 1 DIGITAL INDIVIDUAL FILE

\$50

PACKAGE B
 1 MEMORY MATE, 1 5X7 INDIVIDUAL,
 & 8 WALLETS

\$35

PACKAGE C
 1 MEMORY MATE COLLAGE
 WITH ONE INDIVIDUAL PHOTO
 AND ONE TEAM PHOTO

\$25

A La Carte (please circle selections):



8x10 INDIVIDUAL= \$15



8 WALLETS= \$13



8X10 TEAM= \$15



BUTTON= \$15



5X7 INDIVIDUAL= \$13



MAGNET= \$13



5X7 TEAM= \$13



IND. DIGITAL FILE= \$15

PAYMENT

Cash

Check #:

MC/VISA

CARD NUMBER:

EXP:

SIGNATURE:

SECURITY
 CODE:

ORDER TOTAL

PACKAGE(S): _____

A LA CARTE: _____

ADD 5.5% TAX _____

TOTAL: _____