



# FERIA GRAFIX

INV#  
Meet:  
Session:

858.880.7159 | studio@feriagrafix.com | feriagrafix.com

## PHOTO ORDER FORM

rev. 7/14

Parent Name \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

Order  
8 x 10 \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

8 x 12 \_\_\_\_\_

Phone \_\_\_\_\_

11 x 14 \_\_\_\_\_

Email \_\_\_\_\_

11 x 17 \_\_\_\_\_

### ATHLETES INFORMATION

16 x 20 \_\_\_\_\_

Name \_\_\_\_\_

20 x 24 \_\_\_\_\_

Team \_\_\_\_\_

20 x 30 \_\_\_\_\_

Age \_\_\_\_\_

Level \_\_\_\_\_

Paint \_\_\_\_\_

Message: i.e. "if you dream it, you can do it"  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Add Ons  
5 x 7 \_\_\_\_\_

I give permission to have our athlete photographed.  
All rights reserved.

Postcards \_\_\_\_\_

CC# \_\_\_\_\_

Wallets \_\_\_\_\_

I have read and approve the above information  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Upload \_\_\_\_\_

**Subtotal** \_\_\_\_\_  
**Shipping** \_\_\_\_\_  
**Total** \_\_\_\_\_  
**Payment**  
cash check charge  
paid balance