

**PMEA District 7 Orchestra
February 10, 2018**

**Group Portrait Reservation Form
Deadline: February 17, 2018**

Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip Code: _____

Cash (Correct Amount) _____ Credit Card: Discover, Mastercard, Visa
Payment by Check: _____ Credit Card # _____
Driver's License # _____ Exp. Date _____
IS REQUIRED ON ALL CHECKS 3 digit code at signature _____
Signature: _____

Circle → Group Sizes: A) 8" x 12" - \$ 20.00 B) 10" x 13" - \$ 30.00 C) 12" x 18" - \$ 45.00
Please reserve _____ group portrait (s) at a cost of _____ each. Total \$ _____
Please reserve _____ group portrait (s) at a cost of _____ each. Total \$ _____
The above price includes Shipping & Handling TOTAL ENCLOSED \$ _____

Return this form with your check made payable to " R.A. HOWARD PHOTOGRAPHY" to:

R.A. Howard Photography 738 Cumberland Street Lebanon, PA. 17042
717-272-4231 Allow 4-6 Weeks for Delivery

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