Heritage Studios

Capturing the Moment to Create the Memory

12001 Tejon St STE 124 Westminster, CO 80234 Ph: 303-460-8705
www.heritageportraitstudios.com

Basketball Order Form

"In the Years to come these Great Portraits will be Treasures to Remember."

- One order form for **each** Student. Be sure to provide as much of your Student's information in the space provided below. Indicate the quantity of portraits needed for each size of print. By mail we accept MC, Visa, or Check. Phone orders welcome.
- If paying by check, make payable to **Heritage Studios.** Place your order form and payment inside an envelope.

All sales taxes are included in purchase prices. Please allow 2 to 3 weeks for delivery.

PLEASE PRINT CLEARLY: School Name:_____

Student Name: _____

Photo taken Date:_____

Mailing Address:

Name: _____ Ph: ( )-_____

Street: _____ City:_____ State: _____ Zip Code:_____

To view package samples please visit our website at
http://www.heritageportraitstudios.com/basketball.htm

	Qty	PKG	Package Description	Value	Ext.
		1	1-10x8 Composite 2-3" Magnets 12-Trading Cards	*$ 30.00*	
		2	1-10x8 Composite 4-Wallets 1-3" Magnet		
		3	1-10x8 Composite 4-Wallets	*$ 20.00*	
		4	***1-10x8 Composite***	$15.00	
		5	1-10x8 Team Photo Only	*$ 12.00*	
		6	1-7x5 Team Photo Only	$10.00	
After one of the above packages has been ordered, ***the following*** Bonus Add-On ***items may be added to your package purchase in any quantity or combination.***					
Bonus Add-Ons					
		AA	1-8x10 MVP Cover Shot	*$12.00*	
		BB	1-8x10 Individual	*$ 10.00*	
		CC	2-5x7 Individual	*$ 10.00*	
		DD	8 Wallets	*$ 10.00*	
		EE	1-3" Photo Magnet	*$ 7.00*	
		FF	8 -Trading Cards	$ 12.00	
		GG	1- Photo Key Chain	*$ 8.00*	
		HH	1-Photo Button	$ 8.00	
			All sales tax included		

Office Use			
	Sub-total Amount		
	Total Amount Due		

All checks will be electronically submitted for payment.
A $20.00 fee will be charged on all returned checks.
Please complete order form before appointment time.

Payment type: Circle one: ***Visa*** ***MC*** ***Check***

Credit Card Number

				-					-					-				

Exp. Date _____ ***CVC:*** _____

Signature: _____

Card Billing Address if different than mailing address:

Name: _____

Street: _____

City ***State*** ***Zip***

_____ _____ _____

All checks will be electronically submitted for payment.
A $20.00 fee will be charged on all returned checks.

Mail Order Form and Payment to:
Heritage Studios
12001 Tejon St STE 124
Westminster, CO 80234

Phone Orders
303-460-8705 Please allow 2 to 3 weeks for delivery.

Prices subject to change without notice. Date:01-28-12

* Must have ordered Action Composite on original order.

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