Light Touch Photos Print Order Form

PLEASE PRINT LEGIBLY:

Client Name:_____

Mailing address:_____

Email address: _____

Phone number: _____

Gallery/Show	IMAGE NUMBER	PRINT SIZE	QUANTITY	PRICE EA	TOTAL
			Subtotal		
			tax (8% in NYS)		
			shipping	$5.00	
			total		

Mail form to: Angela Possemato
229 Farmview Dr
Macedon, NY 14502

OR

attach form to email: LightTouchPhotos@gmail.com

phone: 585-330-2379

Check one:

_____ Payment by check is included with order form

_____ Please email me an invoice to pay with credit card

Purchase Agreement

Buying the above prints does not transfer copyright ownership. Noncommercial, personal use only, no reproductions by any means unless specifically licensed to do otherwise by Light Touch Photos in writing. Payment must be made in full before prints are shipped. Allow 1 week.

Client Signature_____ date_____