

CPMHA Photo Order Form

Please print clearly

First Name: _____

Last Name: _____

Player # _____ Team: _____

Print	Price	Qty	Total
1 – 5x7 Team Only	\$5		\$
1 – 8x10 Player Portrait	\$10		\$
2- 5x7 Player Portrait	\$10		\$
4- 4x6 Player Portrait	\$10		\$
9- Wallets	\$10		\$
1- 8x10 team & player Includes player name, level, and names of team members	\$20		
Grand Total Due			\$

Payment due with Order

Cash or Cheque

Cheques payable to Amanda Pfeifer

Thank you