## Booking Form

## CLIENT INFO

OLILIA INTO		
Name:	Phone:	
Address:	Email:	
City:	Postal/Zip Code:	
	State/Providence:	
SESSION INFO		
Type of Session:		
Session Date: //	Start Time:	End Time:
Number of Photos:		
Number of People:	Ages:	
Comments and/or special rec	luests:	
FEES & CHARGES		
Session Fee:		
Add Ons/Extras:		Tax: \$
Deposit Paid:		Balance: \$

I/we do hereby agree to pay a retainer fee of \$ \_\_\_\_\$75 \_\_ I understand this fee is non-refundable and that the balance must be paid prior to, of on the day of the photo session. All parties agree to the less stated above and hereby accept the amounts charged.

Date: / /