

Please fill out this form; all fields are required.

Please fill out and return this form along with full payment, and one wallet sized photo for identification. This photo will be returned to you with your order.

We accept checks, money orders and credit cards. Payment in full is required.

Allow 2-3 weeks for delivery. No substitutions on package configuration.

Mail or fax this form to:

White's Studios, Inc.
 4924 Lankershim Blvd.
 North Hollywood, CA 91601
 Fax: 818-762-2870

Scan Here To Order Online:



Ship to:

Student Name & Grade: _____

School Name & Event: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____

Item	Description	Quantity	Unit Price	Amount
#80	High-Resolution Digital Download		\$35	
#81	8 - 2x3 full wallets		\$20	
#82	2 - 5x7s		\$20	
#83	1 - 8x10		\$20	
#84	16 mini wallets		\$20	
#85	2 - 3x5s, 8 mini wallets		\$20	
#86	1 - 5x7, 8 wallets		\$20	
#87	1 - 8x10, 2 - 5x7s, 8 - 2x3 full wallets		\$40	
#88	2 - 5x7s, 16 - 2x3 full wallets		\$40	
#89	24 - 2x3 full wallets		\$40	
#90	2 - 5x7s, 2 - 3x5s, 8 - 2x3 full wallets, 8 mini wallets		\$40	
#99	Retouching		\$10	

Payment Information:

Card Number: _____	Expiration Date: ____/____/____ <small>(mm/yyyy)</small>	CVV (3 digit # on back of card): _____
Name on Card: _____	Billing Address: _____	
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> American Express <input type="checkbox"/> Check or Money Order <small>(Please make checks payable to White's Studios, Inc.)</small> <small>I authorize White's Studios to convert my check to an electronic fund transfer. All returned checks subject to a \$25 fee.</small>		Billing Zip Code: _____

\$ _____ SUBTOTAL

\$ _____ 9.5% CA SALES TAX

\$ _____ TOTAL DUE

\$ 4.00 SHIPPING & HANDLING

\$ _____ GRAND TOTAL

NORTH HOLLYWOOD STUDIO
 4924 Lankershim Blvd. Phone: 818.752.7780
 North Hollywood, CA. 91601 Fax: 818.762.2870

NORTHRIDGE STUDIO
 8961 Reseda Blvd. Phone: 818.727.2600
 Northridge, CA. 91324 Fax: 818.280.2605

Internal Use Only
 Order Entered: _____
 Ship Date: _____