



FALL PORTRAITS  
JACOLA  
TUESDAY AUGUST 26

Childs Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Parents Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
EMAIL: \_\_\_\_\_

_____ Pkg A	(1) 8 x 10	Additional Pictures can be purchased:	
	(2) 5 x 7	Pkg C: _____	(1) 8 x 10 \$15
	(8) wallets	Pkg D: _____	(2) 5 x 7 \$15
	\$35	Pkg E: _____	(4) 3.5 x 5 \$15
		Pkg F: _____	(8) wallets \$15
_____ Pkg B	(2) 5 x 7		
	(4) 3.5 x 5		
	(8) wallets		
	\$35		
_____ Pkg G	\$20	DIGITAL IMAGE (1) POSE(PLEASE PROVIDE EMAIL)	

GRAND TOTAL: \_\_\_\_\_

\*\*\* Portrait money is DUE day of pictures\*\*\* \*\*\* Payments can be cash/check\*\*\*  
CHECKS PAYABLE TO REFLECTIONS STUDIO\*\*\* Portraits will be delivered  
within 7-10 days\*\*\*

Thank you!

REFLECTIONS STUDIO  
VANESSA COLLINS OWNER/OPERATOR  
850-239-0030