

E X P O S E
P H O T O G R A P H Y
Preschool & Parent and Tot
Gymnastics Photo Order Form

First Name of Gymnast: _____
 Last Name of Gymnast: _____
 Current Level: _____
 Practice Day and Time: _____
 Phone Number: _____
 Email: _____

Quantity	Size	Price
	5x7 Standing Pose with text	\$15
	8x10 Standing Pose with text	\$25
	PHOTO PACKAGE DEAL 5x7 Standing pose with text 5x7 Standing pose without text 8x10 Standing pose with text Individual Photos on disk with and without text	\$50
	Black frame for team photo	\$25

TOTAL = \$ _____

I give permission to Gelico Gymnastics to use _____ (name of gymnast) photos for promotional or advertisement purposes:		
YES	NO	Signature: _____

Reminder – Please give your order form and payment to photographer just before your child gets his/her picture taken.

**Cash only*