

# Kathy's Sports Shots

19 West Orange Court  
Baltimore, Maryland 21234

**410-446-2125**  
**Email: stphotos@msn.com**

**Shipping and Packaging Add 3.00**

<b>(A) 1 Memory Mate Digital</b>	
8 Wallets	25,00
<b>(B) 1 Memory Mate Digital</b>	
12 Trading Card	35,00
<b>(C) 1 Memory Mate Digital</b>	
1 8x10	
16 Wallets	40.00
<b>(D) 1 Memory Mate Digital</b>	
1 Magazine Cover & 2 5x7 Individual	
8 Wallets	40.00
<b>(E) 2 5x7 Individual &amp; 1 5x7 Team</b>	
8 Wallets	35.00
<b>(F) 24 Wallets</b> <b>1 5x7 Team FREE</b>	
1 8x10 Individual	
2 5x7's Individual	45.00
Write Package Letter _____	

**NO CHECKS ACCEPTED**

## Additional Items

(Memory Mate Include (1) 3x5 ind & (1) 5x7 Team)

(1) 1 Memory Mate (Digital)	20.00
(2) 1 Memory Mate (Cardboard)	18.00
(3) 1 Memory Mate (Specialty wood)	25.00
(Baseball, Basketball, Soccer, Football)	
(4) 1 Memory Mate (Wood)	36.00
(5) 1 Magazine Cover	16.00
(6) 1 3in Button	10.00
(7) 2 3x5 Photo Magnets	12.00
(8) 1 Key Chain	10.00
(9) 1 Bag Tag	10.00
(10) 1 Sports Water Bottle	14.00
(11) 1 Statuette	39.00
(12) 1 Photo Clock	35.00
(13) 12 Trading Cards	18.00
(14) 5 Game Day Tickets	10.00
(15) 10 Game Day Tickets	18.00
(16) 8 Wallets	8.00
(17) 16 Wallets	16.00
(18) 1 5x7 & 4 Wallets	14.00
(19) 2 5x7 Individual	16.00
(20) 1 5x7 Team	9.00
(21) 1 8x10 Individual	12.00
(22) 1 8x10 Team	12.00
(23) 1 16x20 Poster	30.00
(24) 1 Wheaties Photo	16.00

Write Package Number \_\_\_\_\_

perf

GLUE STRIP

score

- Instructions**
- Each player must have a separate envelope
  - This form must be completed and given to the photographer
  - We assume no responsibility for illegibility or misspellings
  - Photo Retouching Additional Charge

**Players Information**

Clearly Print First & Last Name Below

Name of Player \_\_\_\_\_

Cell# \_\_\_\_\_ Daytime# \_\_\_\_\_

E-mail \_\_\_\_\_

Team Name: \_\_\_\_\_ Jersey# \_\_\_\_\_

Shipping Label Print Clearly ( ADD \$3.00)

Name \_\_\_\_\_

Address \_\_\_\_\_ APT \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Visa, Master Card & Discover ONLY

Credit Card# \_\_\_\_\_

Exp \_\_\_\_\_ / \_\_\_\_\_

Card Holder's Name \_\_\_\_\_

Signature \_\_\_\_\_ SEC COD \_\_\_\_\_

Billing Address \_\_\_\_\_

For Trading Cards:

PLEASE PRINT CLEARLY BELOW

Child's First and Last Name:

\_\_\_\_\_

Age \_\_\_\_\_ Height \_\_\_\_\_

Uniform# \_\_\_\_\_ Position \_\_\_\_\_

Coach Name \_\_\_\_\_

**NO CHECKS ACCEPTED**

Change Given: Yes \_\_\_\_\_ NO \_\_\_\_\_

PKG Letter \_\_\_\_\_ PKG Number \_\_\_\_\_ Total \_\_\_\_\_

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Cash  Money Order  Charge Card

Mailing Information

Credit Card Information

Trader Card Information