

**Your Logo
Here**

Company Name
Tel: (123) 456-7890
Email: yourmail@yourmail.com



Athlete Information

Please fill in ALL information below

First Name:

Last Name:

Tel: -

Parent/Guardian:

Email:

Team:

Position:

Hometown:

Number: Age: Height: Weight:

Missing information may result in empty spaces on certain products

Packages

A

- 1 - 8" x 10"
- 1 - Magazine Cover
- 2 - 5" x 7"
- 8 - Wallets
- 6 - Trader Cards

\$XX

B

- 1 - 8" x 10"
- 2 - 5" x 7"
- 4 - 4" x 5"
- 8 - Wallets

\$XX

C

- 1 - 8" x 10"
- 2 - 5" x 7"
- 4 - 4" x 5"
- 8 - Wallets

\$XX

D

- 1 - 8" x 10"
- 2 - 5" x 7"
- 8 - Wallets

\$XX

Prices include all applicable taxes

Packages

E Personalized Fun Pack

Includes two (2) bookmarks, three (3) bag tags, four (4) keychains, and one (1) doorhanger with picture.

\$XX



F Personalized Memory Mate

Individual and Group Picture
1- 8" x 10"

\$XX



G

1- 8" x 10"

\$XX



H

2- 5" x 7"

\$XX



I

Mini Poster
1- 16" x 20"

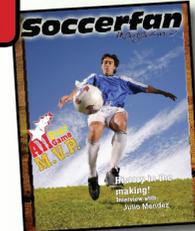
\$XX



J Soccerfan Magazine Cover

1- 8" x 10"

\$XX



K Keychains

2- 2" x 3"

\$XX



L

8- Wallets

\$XX



M

4- 4" x 5"

\$XX



N

Nine (9) Personalized Trader Cards
(Please fill out information on first page properly)

\$XX



O

4 Personalized and Laminated Game Tickets

\$XX



P

Fridge Magnets
2- 2" x 3"

\$XX



Q Photo CD

A high resolution CD-Rom containing your child's image. Perfect for printing and archiving! Includes reprint release.

\$XX



Instructions

- Enter all your information on the first page (Missing information may result in empty spaces on certain products). Consult this product sheet for information on packages and special products.
- Enter packages, quantity and prices into the boxes provided on the right. **See example.**
- Calculate the total price of your order (taxes are included) and enclose cash, check* or provide your credit card information below.

Packages, Quantity and Total

Package	Quantity	Price
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

TOTAL

*Please Make Checks Payable To: Your company name goes here

Payment Method

Cash
 Credit Card
 Check

For Credit Card Payments Complete Form below

Example

Package	Quantity	Price
A	1	\$XX. ⁰⁰



Credit Card Payment

To be filled only if payment is by credit card

Cardholder's name:

Tel. (day):

Team Name:

Child's name:

Credit card (Visa or Master card only)

Exp.: /

Amount:

Signature:

I authorize the amount indicated above to be charged to my credit card. I also waive my right to require a credit card imprint as proof of authorizing this sale regardless of merchant or card holder agreements