

About Face Photo Booths, LLC

Client Name: _____ Invoice # _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Type of Event: _____ Event Date: _____

Event Location & Contact person: _____

Event Address: _____

Cocktail hour starts: _____ Reception start time: _____ Reception end time: _____

Booth Start Time: _____ **Booth** Finish Time: _____ Number of Guests: _____

Number of Hours: Two-\$695 Three-\$795 Four-\$895

OTHER(specify): _____

Options:

B&W Color Props: Yes No Scrap Book: Yes No

Personal Message on Photo Strip: _____

Event Color/Theme: _____ How did you hear about us? _____

Please select your package:

Total Charges:

Deposit: **A \$200 DEPOSIT MUST BE RECEIVED TO HOLD YOUR EVENT DATE.**

Balance due after deposit: **BALANCE DUE TEN (10) DAYS PRIOR TO RENTAL EVENT DATE.**

Client - Signature

Date

Representative for About Face Photo Booths LLC

Date

