



COLLEEN ROSENTHAL  
AWARD-WINNING PHOTOGRAPHY

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PHOTO SERVICES CONTRACT

Event \_\_\_\_\_

Starting Time \_\_\_\_\_

Start Location \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (cell) \_\_\_\_\_

Email Address \_\_\_\_\_

Password for online viewing gallery \_\_\_\_\_

Specifics: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If this agreement meets with your approval, please sign and return with your Session Fee.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please make a copy for your records.

OFFICE USE ONLY

Amount and date Retainer Rec'd \_\_\_\_\_

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