



Player Poster

10"x20" Poster
\$45.00

Your Information

| |
|------------------|
| Parent's Name |
| Player's Name |
| Street Address |
| City, State, Zip |
| Phone |
| Email |
| Team |

| | |
|-----------------|--|
| Player's Name | |
| Additional Text | |
| Pose 1 (Left) | |
| Pose 2 (Center) | |
| Pose 3 (Right) | |

ProEventPhoto

20116 Chagrin Blvd, Shaker Heights, OH 44122
 216-991-EVENT/888-9PROEVENT
 manager@ProEventPhoto.com

RobinsonHockeyPhotos.com

Your Payment

- Cash
- Check No _____ Make Check Payable to:
ProEventPhoto
- Credit Card (MasterCard, Visa, AmEx, Discover)

Card Number _____

Expiration _____ CID _____

Signature _____
 Please include an email address for your credit card receipt.

| | | |
|--------------|---------------|------------|
| Order# _____ | Trans # _____ | Ship _____ |
|--------------|---------------|------------|