



BMofH Photography

"Will Cunningham"
P.O. Box 68193 Baltimore, MD 21215
Call 443-794-1636 Voicemail

PHOTOGRAPHY PHOTO SESSION AGREEMENT

NAME (PLEASE PRINT)		CITY		STATE	ZIP
ADDRESS (PLEASE PRINT)		HOME PHONE		WORK PHONE	
AGE:	BIRTH DATE:	GENDER:	HEIGHT:	WEIGHT:	HAIR:
SUIT:	SHIRT:	INSEAM:	SHOE:	DRESS:	COLOR OF EYES:
HAT SIZE:	WAIST:	HIPS:	CHEST:	Email Address:	

• PURPOSE •

____ WEDDING ____ PORTRAIT ____ FASHION ____ FAMILY ____ OTHER

Date Of Appointment: _____ Time: _____ # Of Photos: _____ Color ____ B/W ____

• Consent •

I, _____, hereby agree and understand all information relative to services provided by BMofH Photography. I also certify that I am 18 years of age or older.

IF UNDER THE AGE OF 18, CONSENT MUST BE PROVIDED BY THE CUSTODIAL PARENT.

I, _____, the custodial parent of _____ hereby agree and understand all the above information relative to services provided by BMofH Photography.

PHOTOGRAPHY

4x6 and or contact sheets will be ready in (5-7) working days.
Enlargements take from (10-14) working days. Enlargements from photographs (without negatives) will cost an additional \$5.00.

DISCLAIMER

BMofH Photography IS HEREBY GRANTED PERMISSION TO USE ANY PHOTOGRAPHS OR TRANSPARENCIES MADE FROM THE NEGATIVES OF THIS APPOINTMENT FOR DISPLAY, EXHIBITION, AND GENERAL ADVERTISING PURPOSES.

Deposit is due upon signature of this agreement. You will be notified by phone when pictures are ready; if, you fail to retrieve your photographs within (10 days) after this correspondence, you will lose your deposit. Photographs retrieved after this time frame, must be PAID IN FULL

It is agreed that the client will pay the total balance due within 30 days of being notified of the completion of this assignment. A service charge of 1 1/2% per month (18% annual rate) or the highest rate allowed by law (whichever amount is less) will be applied to all past due accounts, and the client shall be liable for any necessary cost of collection.

NOTICE OF COPYRIGHT: It is Illegally copy or reproduce these photographs elsewhere without photographer's permission, and violators of this Federal Law will be subject to its civil and criminal penalties.

Client _____ Date _____

Studio **BMofH Photography** Date _____

COMMENTS:

PHOTOGRAPHIC FEES	\$	-
ENLARGEMENT(S)	\$	-
PORTFOLIO(S)	\$	-
COMP CARD(S)	\$	-
CONTACT SHEET(S)	\$	-
MAKE-UP	\$	-
ASSISTANT(S)	\$	-
MODEL(S)	\$	-
PROPS	\$	-
TRAVEL	\$	-
DAMAGES	\$	-
SHIPPING & HANDLING	\$	-
TOTAL	\$	-
SALES TAX	\$	-
TOTAL W/ TAX	\$	-
DEPOSIT	\$	-
BALANCE DUE	\$	-