

SWIMMER'S AGE GROUP:

- ☐ 8 & Under ☐ 12- 14
☐ 9 - 11 ☐ 15 & Over

TEAM PHOTO ONLY? ☐Make-Up PhotoDay ☐

STARTING FRAME #

SELECT FRAME #



CTAP MARLINS PHOTO ORDER FORM 2025

*A portion of the proceeds are donated to the CT Marlin Swim Team**Friday, May 30 – 7:45 a.m.***You Must Wear Your NEW 2025 CT Marlins T-Shirt!!**

TEAM PHOTOGRAPH

8 x 10 print..... \$20/print - ____ # of sheets

INDIVIDUAL PHOTOGRAPHS

****NEW for 2024** Digital file:** With the purchase of a portrait print, the corresponding jpeg will be emailed to you. (Team photo not included) ☐ \$15

8 x 10 print..... \$20/print - ____ # of sheets

PACKAGE A (one sheet = two 5 x 7 prints)..... \$20/sheet - ____ # of sheets

PACKAGE B (one sheet = eight 2.5 x 3.5 wallets) \$20/sheet - ____ # of sheets

PACKAGE C

(one sheet = one 5 x 7 + four 2.5 x 3.5 wallets) \$20/sheet - ____ # of sheets

COMBO Package: Small Team PLUS Small Individuals:

(one 5 x 7 TEAM + four 2.5 x 3.5 INDIVIDUAL wallets) ... \$20/sheet - ____ # of sheets

TOTAL Number of Sheets: ____ x \$20/Sheet = Cost: \$ ____

jpeg (\$15 with purchase of Individual Portrait prints): Cost: \$ ____

ORDER TOTAL \$ ____

PLEASE FILL OUT A SEPARATE FORM FOR EACH SWIMMER(S) PHOTO

Swimmer's Name (*First and Last*) _____Parent's Name (*First and Last*) _____

Your address _____

City _____ State _____ Zip _____

Your phone _____

Your email _____

☐ Cash: Amount: _____

Change due w/prints _____

☐ Check Number: _____☐ Venmo: _____

@bobbinghamphoto

Support your team AND have life-long memories of CT Marlins!*Cash or Check!**Please Make Checks Payable To:**Bob Bingham Photography**Venmo: @bobbinghamphoto*

*Keep this form with you,
& bring it to PhotoDay with payment*

*CT wants you to be satisfied!**Please call with any Questions or Concerns:**Bob Bingham Photography**520-891-4539**bobbingham@mac.com***Thank you!**