



Ray of Light Images

115 S. Main Street
Suite 100
Cleburne, Texas 76033

ROLLS



Parents Name and Address

Email Phone Number

Package Purchased Total Due

Childs Name Group Name (ie. Percussions, strings)

Credit Card # Exp Date CVS # (3 digit # on back)

Signature (for credit card) By signing your name you give Ray of Lights Images permission to charge the total due **PLUS a \$1** service fee to the credit card listed above.