



Prepay/Proof Flyer Request Form

ONE FORM MUST BE COMPLETED PER REQUESTED FLYER! All items must be completed and emailed to your Customer Service Rep. If you have any questions, contact your Customer Service Rep for guidance.

CUSTOMER INFO				
Studio Name	New Customer?	Account Number	Submit Date	First Photo Date
	<input type="checkbox"/> YES <input type="checkbox"/> NO			
Artwork Reviewer/Approver <i>(this is the contact(s) that will be approving artwork)</i>			Reviewer/Approver Email	

FLYER INFO	
Is This For <input type="checkbox"/> UNDERCLASS <input type="checkbox"/> CAP & GOWN <input type="checkbox"/> SPORTS <input type="checkbox"/> CLASS GROUP <input type="checkbox"/> SENIOR <input type="checkbox"/> DAYCARE <input type="checkbox"/> CHRISTMAS <input type="checkbox"/> OTHER _____	
Flyer Type <input type="checkbox"/> PREPAY <input type="checkbox"/> PROOF <input type="checkbox"/> SPEC	Size <input type="checkbox"/> 11x17 <input type="checkbox"/> OTHER _____ Print Quantity _____
What previous Form # do we need to replicate? _____ <i>ATTN. NEW CUSTOMERS! Please provide your Customer Service Rep with your package configuration and pricing when sending in this form.</i>	
Choose your new Flyer Template from the drop down menu (Underclass Only). <i>For a listing of available templates please reference your mailer or contact your Service Rep.</i> <input style="width: 100%; height: 20px;" type="text"/>	
<input type="checkbox"/> PRINT ONLY. I DON'T WANT TO USE ANY OF THESE. I WILL BE DESIGNING MY OWN FLYER. NOTE - if you will be designing your own Proof Flyer, you will need to contact your Service Rep for a Form #. Once that's added, please provide APS with a high quality (10+) jpg, for printing and DP2 processing. For a Prepay Flyer, we will only need a 300 dpi, print ready PDF.	
Will there be other artwork needed, besides this flyer? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list. _____	

INSTRUCTIONS <i>(Please list all requested changes in this space and be specific.)</i>

GREEN SCREEN <i>(If you aren't offering Green Screen, Please fill out the Styles Section below.)</i>										
Will you be offering Green Screen?? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list Green Screen backgrounds you want to use. <i>For a listing of available backgrounds contact your Service Rep or visit http://advancedphoto.com/green-screen-backgrounds/</i>										
<table style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr> <tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> </table>	1	2	3	4	5	6	7	8	9	10
1	2	3	4	5						
6	7	8	9	10						
Please list the code for the model you would like to use on each background. <i>For a listing of available models see your reference sheet or contact your Service Rep.</i>										
<table style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr> <tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> </table>	1	2	3	4	5	6	7	8	9	10
1	2	3	4	5						
6	7	8	9	10						
Will you be using any custom backgrounds? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, please provide image to your Service Rep for approval and to be used on your flyer</i>										
List your 3 default backgrounds? (#1 will ALWAYS be the default.)										
<table style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td></tr> </table>	1	2	3							
1	2	3								

STYLES <i>(If you aren't offering Green Screen, Please fill out this section.)</i>				
Will you be offering Styles? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list styles you want to use. <i>Contact your Service Rep with any questions.</i>				
<table style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td></tr> </table>	1	2	3	4
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1	2	3	4	

DISTRIBUTION <i>(Prepay ONLY.)</i>
Location _____ Attn _____ Loading <input type="checkbox"/> YES <input type="checkbox"/> NO Address _____ Dock <input type="checkbox"/> YES <input type="checkbox"/> NO City _____ St _____ Zip _____

APS OFFICE USE ONLY
New Form # _____ Print <input type="checkbox"/> IN-HOUSE <input type="checkbox"/> SPM Service/Sales Rep _____

PLEASE PROOF CAREFULLY!
 Your price includes 3 sets of proof revisions. Once you exceed the 3 revision sets, you will be charged an additional \$50/set of revisions.