

PAYMENT and CONTACT FORM 1/2



11-15 Vivian Street, 6011
PO Box 9711 Marion Square, 6141
Wellington
Tel: 04 384 3713
e-mail: lab@wps.net.nz
web: wps.net.nz

Courier/Postal Lab Ordering Form:

Please print, fill out and include with your order when sending to us by Post or Courier.

All completed jobs will be returned by **courier** once payment has been processed. We always endeavour to package as economical as possible while ensuring safety.

If you prefer to internet bank deposit, please indicate this and we will email you our account details for payment.

Sending to us by Post: Attn: Lab, Wellington Photographic Supplies
PO Box 9711 Marion Square, 6141, Wellington

Sending to us by Courier: Attn: Lab, Wellington Photographic Supplies
11-15 Vivian Street, 6011, Wellington

Your Contact details:

Name:.....
Phone:.....
Email:.....
Courier Address:.....
.....
.....

Your Payment details:

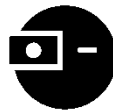
Tick if **Tax Receipt** Required.

Cheque enclosed **Online Bank Deposit** (An email will be sent with our Account details.)

Visa **Mastercard**

Name on card:.....
Card Number:.....
Expiry Number:.....

**FILM DEVELOP AND PRINT ORDER
FORM 2/2**



WELLINGTON
PHOTOGRAPHIC
SUPPLIES

11-15 Vivian Street, 6011
PO Box 9711 Marion Square, 6141
Wellington
Tel: 04 384 3713
e-mail: lab@wps.net.nz
web: wps.net.nz

Your Contact details: (full details on page 1)

Name:.....

Phone:.....

Tick only those that apply:

C41 Colour Film
(Specify quantity films)

Black and White
(Specify quantity films)

Cross Process
(Specify quantity films)

E6 (slide)
(Specify quantity films)

Matt (Lustre)

Gloss

No Border

Border

1x each (prints)

2x each (prints)

3x each (prints)

Print Sizes: (All listed as inches)

3X5

4X6

5X7

5X7.5

6X8

6X9

DEVELOP ONLY

NEGS UNCUT

NEGS CUT

Cut 4's
(35mm only)

Cut 6's
(35mm only)

STD RES CD
4x6 @ 300dpi

MED RES CD
8x12 @ 300dpi

PUSH PROCESS
(Specify how many stops)

PULL PROCESS
(Specify how many stops)

Instructions/Notes: