

High School Graduation Video Order Form

High School: _____

Name: _____

Phone: _____

Ship to Address: _____

City, State, Zip: _____

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Please allow **6-8 WEEKS** for shipping and delivery after the graduation season

Payment is due at the time of ordering

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Memories Videography
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QUESTIONS?

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(804) 273-9044

FOR OFFICE USE ONLY

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