

AB Image Professional Lab

New Customer Questionnaire

Account Name: **Date:**
Address: **Phone:**
City: **State:** **Zip:** **Alternate Phone:**
State Sales Tax/Use Tax No. (requires) **Fax:**
Email Address:

Years in business:

Type of Business: **Portrait Studio** **Commercial** **Other**

Approximate number of portrait sitting per year?

Approximate number of weddings per year?

Approximate number of events per year? (proms, sports, etc.)

What did you hear about AB Images?

AB Images
326 Shore Acres
La Crescent, MN
55947
507-895-6672
www.ABImages.net

Name of Owner(s) or Principal Officer:

Spouse's Name:

Check box if involved in studio:

Do not write in this space