Kelly Edgar Designs

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Print Questionnaire

One product per questionnaire only.

Company Name:	
Contact Person:	Job #:
Phone: Fax:	Designer:
Address:	Project Title:
City: State: Zip:	Today's Date:
Email:	Proof Date: Due Date:

PROJECT DESCRIPTION AND QUESTIONS: (ATTACH PAGES AS NEEDED)

PROJECT PURPOSE:

AUDIENCE:

TYPE OF PRINT PRODUCT:

PROJECT DETAILS AND SERVICES NEEDED: (ATTACH PAGES AS NEEDED)

NOTES:

I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS AGREEMENT AS IT APPLIES TO THE PROJECT DESCRIBED IN THIS DOCUMENT (TERMS ATTACHED)

CLIENT NAME: _____ CLIENT SIGNATURE: _____ DATE: _____ DESIGNER APPROVAL: _____