

# BOOKING DEPOSIT

Invoice # \_\_\_\_\_

Date: \_\_\_\_\_

## STUDIO NAME / PHOTOGRAPHER

123 Studio Street  
City, State, Zip  
email@address.com

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### BILL TO

**Client Name**

Client Address

Phone Number

Client Email

### SESSION DETAILS

**Session Type:** Headshot Photography

**Date:** \_\_\_\_\_

**Location:** \_\_\_\_\_

### Description

### Amount

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#### Non-Refundable Booking Deposit

Secures session date and time. Applied to total balance.

\$0.00

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Subtotal: \$0.00

Tax: \$0.00

Deposit Due: \$0.00

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### NOTES & TERMS

Payment of this deposit confirms your booking and agreement to the photography service contract. This deposit is non-refundable but may be transferable to a rescheduled date given 48 hours' notice. The remaining balance is due on or before the session date.