REQUEST FORM

*** ASI Graphics solely creates designs. We do NOT handle any form of printing services ***

Name/Contact			Date Submitted		
Phone Num	ber		Email Address		
Club/Organization			Are you chartered? Yes No (If no, please s		
TYPE:	O Poster (11" x 17") O Flyer (8.5" x 11") O Handout (4.25" x 5.5 O Logo O Brochure O T-Shirt Design O Other:	AwardCertificateInvitationTicketSMSU Digital Signage	EVENT INFORMATION: (if applicable) Event Name Event Date & Time		
PLEAS	SE READ AND		FOR OFFICE USE ONLY:		
ASI Graphichartered an hourly ASI Grapheach indiversed in the two although the delays in content, experienced in the two although the two alth	by SLD. Individuals and of rate; please refer to the bics offers design consultavidual request, after whice pplicable. We require that your request (photos, text before the start of the deix week turnaround begins. We have a TWO WEEK MIN correspondence (emails, report regarding your design (external to the control of the total base), ONE-HALF of the total base are handed over. The internal control of the control of the date listed on your involved.	es for student organizations f-campus entities must pay ack of this form for prices. tion services at the start of the charges will come into all material and information event information, etc.) be sgn process, which is when Please be advised that MUM turnaround time, any turned calls, etc.) or lack of vent dates, times, collateral on delays of your request, y incur possible charges. If alance must be paid, before remaining balance must be sociated Students, Incorpo-	Job Number Graphic Artist Date Received (When you pick up job) Hourly Rate (if applicable) Computer File Name (include extension) DESIGNER SIGNATURE: BY SIGNING BELOW, I, AN EMPLOYEE OF ASI GRAPHICS, ACKOWLEDGE THAT THE CLIENT RECEIVING THIS DESIGN HAS RECEIVED AN INVOICE WITH PRICING, DUE DATES AND HAS ALSO PAID 50% OF THE TOTAL BALANCE DUE LISTED ON THE SAID INVOICE BEFORE RECEIVING THEIR DESIGN, IF CLIENT IS AN EXTERNAL AND/OR UNCHARTERED CSUSB ORGANIZATION. Name (please print)		
ASI Graphics reserves the right to apply additional charges (as stated above), delay the production of the request, and cancel the request if deemed necessary. By signing below, I, the originator of this job, have read the above statement and agree to its terms.			Signature & Date CLIENT SIGNATURE: BY SIGNING BELOW, I, THE ORIGINATOR OF THIS JOB, APPROVE THE WORK DONE BY ASI GRAPHICS. I UNDERSTAND THAT AFTER SIGNING BELOW, THERE CAN BE NOT FURTHER CHANGES OR EDITS MADE. I HAVE PAID 50% OF MY TOTAL BALANCE PRIOF TO RECEIVING MY DESIGNS, I AM AN EXTERNAL AND/OR UNCHARTERED CSUSE ORGANIZATION.		
Name (ple	ase print)		Name (please print)		
Signature	& Date		Signature & Date		

Please use this space, including the inside of this form, for any additional information regarding your request. (Specific text, colors, logos, etc)				

ASI GRAPHICS PRICING

	Print	4Winds
Chartered Student Organizations	FREE	FREE (1 Quarter) Additional Ads \$10/Each (1 Quarter)
Students (Individuals/non-chartered orgs)	\$10/Hour	\$10/Each (2 weeks)
On-Campus Entities (Depts/Staff/Faculty)	\$20/Hour	FREE (1 Quarter) Additional Ads \$20/Each (1 Quarter)
Off-Campus Entities (Businesses/Individuals)	\$30/Hour	FREE (1 Quarter) Additional Ads \$30/Each (1 Quarter)
CSUSB Alumni (Individuals)	\$20/Hour	FREE (1 Quarter) Additional Ads \$20/Each (1 Quarter)