

IMMANUEL LUTHERAN PROM DRESS/ACCESSORY SALES

Seller Number: _____

Name: _____

Phone # _____

Address: _____

Cell # _____

Dress Description:

Color	Size	Price	Lowest Price	Additional Information
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Accessory Description:

Description	Price	Lowest Price	Additional Information
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I agree to sell my dress/dresses/accessories for the price listed above. I authorize to allow a lower price if needed, but not to exceed lowest price listed above. I agree that I do not hold Immanuel LYF responsible for lost, damaged, or stolen dresses. I have been notified of dress pick time.

 Seller Signature Date

Claim Check

Seller Number _____ Number of Dresses _____

Number of Accessories _____

Name _____

Dress pickup time is Saturday from 12-12:30 p.m. Thank you for supporting Immanuel LYF.