

Kay Lain Voice Overs



A Voice of Distinction

Please complete this form and return to kaylainvoiceovers@outlook.com along with the copy you would like recorded.

Client: _____
Address: _____
Email: _____
Website: _____
Phone number: _____
Preferred payment method: (Check, PayPal) _____ <i>(check payable to Elizabeth Lain)</i>

Length of VO:
Voice Age: <i>(example: young adult, middle aged, senior)</i>
Job Description:
Category: <i>(Radio, television, telephony, etc.)</i>
Style: <i>(example: authoritative, friendly, confident, excited, warm, genuine, etc.)</i>
Language: English
Accent: <i>(example: General American, Dixie Style Southern, Northern, etc.)</i>

Due Date: _____	Rate: \$ _____
Format: (MP3 or WAV) _____	
How would you like files delivered? (email, Dropbox, mail flash drive) _____	