

# School Portrait Order Correction Form

Student Name: \_\_\_\_\_

Name of School: \_\_\_\_\_

Teacher / Grade: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(if home delivery)

Please check which apply to your original order:

Fall	<input type="checkbox"/>	Pre-Pay Online	<input type="checkbox"/>	Debit Payment	<input type="checkbox"/>
Spring	<input type="checkbox"/>	Pre-Pay Envelope	<input type="checkbox"/>	Credit Card Payment	<input type="checkbox"/>
Cap & Gown	<input type="checkbox"/>	Post Web Order	<input type="checkbox"/>	Personal Check	<input type="checkbox"/>
H.S. Seniors	<input type="checkbox"/>	Phone/Email Order	<input type="checkbox"/>	Cash Payment	<input type="checkbox"/>

Please indicate original order selections:

Package	<input type="checkbox"/>	Add On Item(s)	<input type="checkbox"/>	Background Number	<input type="checkbox"/>
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Remarks / Changes to your original order:

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Please note: If an additional payment is due following changes to your order, please contact our office to process your payment and place your updated order.