

PICTURE DAY RETAKE / ABSENTEE FORM

PLEASE PRINT AND SUBMIT THIS FORM TO THE PTA PRIOR TO PICTURE DAY OR HAVE YOUR CHILD BRING IT WITH THEM ON PICTURE RETAKE DAY.

Student Name: _____

Teacher / Grade: _____

School Name: _____

Parent / Guardian Name: _____

Parent / Guardian Phone: _____

Parent / Guardian Email: _____

Comments or Requests:

Please Note: If your child is having their portrait retaken, please remember to keep your class photo. An additional class photo will not be included in the retake portrait package. Thank you.