



URANGAN STATE HIGH SCHOOL

PHOTO ORDER FORM

STUDENT NAME:	
PARENT NAME:	
STUDENT SCHOOL EMAIL ADDRESS:	

Please clearly indicate below the corresponding photo number that you wish to purchase.
One photo number per box.

Total number of photo's ordered: _____

@ \$7.50 each equals a total cost of: _____

Payment in full is to be made at the time of submitting this order form.
A digital copy of the prints will be emailed to the student email identified above.

Parent / Student signature: _____

Date: _____