



**CEDAR CREST HIGH SCHOOL
GRADUATION DAY PHOTOGRAPHY**

INDIVIDUAL CAP & GOWN PORTRAITS

Cedar Crest High School has contracted with Robert A. Howard of R.A. Howard Studios in Lebanon, to offer photographic packages to the graduating class of 2017. **Individual portraits** in Traditional Cap & Gown will be available from **3:30 -5:30 PM on June 1, 2017** in the New High School Gymnasium. These portraits are done on a first come basis and end promptly at 5:30 PM. (Indoor Commencement: Old Gymnasium.)

 These full color photographs carry a 100 % guarantee of satisfaction. To place your order for one of these special images, you must complete the form below and enclose a check payable to **“R. A. Howard Photography.”** Order forms must be presented to the photographer on the day of the portrait. Portrait orders will be process after 6/12/2017 and mailed to your home in **approximately 8 to 10 weeks** from that date.



 The following packages are available and must be *Paid in Full* at the time you are photographed.

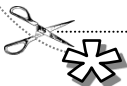
Package “A”	Package “B”	Package “C”	Package “D”
2- 5x7s	1-8x10 2-5x7s 8- Wallets	2-8x10 2-5x7s 16- Wallets	1-11x14 Portrait with text Class of 2017.
\$ 15.00	\$ 30.00	\$ 45.00	\$ 45.00



DIPLOMA HANDSHAKE PORTRAITS



On the night of Commencement, the administration has arranged for Mr. Howard to photograph every student receiving his or her diploma. No reservation is necessary, and each student will be sent a *complimentary “Preview”* of this special event. You are not obligated to make any purchase, however packages will be available should you wish to acquire additional portraits. This service is provided so that everyone may receive a keepsake portrait of this very special moment in his or her child’s life. So relax and enjoy the ceremonies. You will receive your **FREE diploma** portrait in the mail on/or around July 17, 2017.



Individual Portraits: Please bring this form **THE DAY** of COMMENCEMENT.

C.C.H.S. Class of 2017 Portrait Form

Student’s Name: _____ Phone: _____

Full Address: _____

City State Zip Code

Payment by check:

Driver’s License # _____ Check # _____

\$ 50.00 Fee added to all returned checks

Package “A” _____ “B” _____ “C” _____ “D” _____ \$ _____

TOTAL ENCLOSED \$ _____

**◆ R.A. HOWARD PHOTOGRAPHY, ◆ 738 CUMBERLAND STREET, ◆ LEBANON, PA. 17042
◆ 717-272-4231 ◆ www.howardstudios.com**