

School Portrait Days at Lakeside School

Tuesday – Nov. 2, 2021 – Middle School

Thursday – Nov. 4 -Upper School

Retake Day-Friday Dec. 3, 2021 Upper School 9 am-12 Middle 1 to 3:30 pm



Email: info@HellriegelStudio.com

Questions? Call us! 253-631-2901

OK to print out this PDF and use it as your ORDER FORM.

All orders must be prepaid, with a money back guarantee if you are not satisfied.

1. Please fill out your order form/envelope carefully and completely. Return it to school on Photo Day!
2. Be sure to mark the packet/packets you want and enclose your exact payment.
3. Enclose/attach your payment. **Let us know if your payment is for more than one student. Please indicate your payment type so we don't miss your order!**

Please make checks payable to Foto 1. There is a \$25.00 charge for all returned checks.

All Mini wallets are: 1½" x 2¼". Photo Magnets are approx. 2"x3".

Sorry, NO late orders accepted.



Packet A	\$65
2-8x10 2-5x7 4-3x5 8-2x3 24 mini wallets 2 photo magnets	

Packet B	\$50
1-8x10 2-5x7 2-3x5 4-2x3 24 mini wallets 2 photo magnets	

Packet C	\$50
4-5x7 2-3x5 4-2x3 16 mini wallets 2 photo magnets	



Packet D	\$45
3-5x7 2-3x5 12-2x3	

Packet E	\$35
2-5x7 4-2x3 8 mini wallets	

Packet F	\$30
2-3x5 24 mini wallets	

Packet H	\$30
2-3x5 4-2x3	

Packet K	\$38
2-5x7 16-2x3 (large wallets)	

Packet J	\$45
2-8x10 20-2x3	

Packet L.	Download Digital Option.....\$40
DOWNLOAD your child's portrait HIGH RES JPEG image with copyright release.	
Packet L/R (includes digital retouching)	\$50

ALA CARTE OPTIONS

Build Your Own Packet! Mix & Match or add on to packets A thru Z.

M. Add 2 photo magnets.....\$20
 W. Add 8-2x3.....\$20
 V. Add 16 mini wallets.....\$20
 N. Add 4-3x5.....\$20
 P. Add 2-5x7.....\$20
 S. Add 1-8x10.....\$20
 Z. 3 picture keychains.....\$20
 R. Digital Retouching.....\$10

Please send an order envelope/form to school with your student to make sure you get proper credit.

Student's Name: _____ Grade: _____

Parent's Name: _____ Ph: _____

Email: _____ Job: Lakeside School

Payment Type: cash check# _____ credit/debit card Venmo Payment: www.Venmo.com/Kevin-Hellriegel-1

CC# _____ Cardholder's Name: _____

Ex Date: ___/___/___ CVC: _____ Billing Zip: _____ Amount: \$ _____ Packages: _____

To Pay with **Venmo**, please send SCHOOL name, student info, package, and payment to: Kevin-Hellriegel-1
 Hellriegel's Foto 1 (253) 631-2901