

ACTION PHOTOS OF HAWAII INC.

333 LILIUOKALANI ST.

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website: www.apohi.com

E-mail: apoh@hawaii.rr.com

Dear Senior,

Your graduation is an important time in your life. It is a time for you to look back and see how far you have come. It is also a time to define your goals.

We at Action Photos of Hawaii Inc. will be taking a group photo of the entire Class of 2017 and an INDIVIDUAL PORTRAIT of yourself.

We have a great offer for you to purchase your INDIVIDUAL PORTRAIT in your cap & gown while receiving your diploma! One of your most memorable moments in your life. A class group photo will also be taken and is available for purchase in our Graduate 8x10 Special Package.

To participate in this SPECIAL OFFER (BONUS- 2-5x7) you must MAIL, CALL, or TURN IN Payment ON or BEFORE Graduation Day look for us at the Action Photos Booth.

Online Packages Available by Request ONLY
Call For more INFO. 808-572-7081

Orders Placed after GRAD Day will be at Regular Prices.

CREDIT CARD, CASH (EXACT CHANGE ONLY PLEASE)

OR CHECK ACCEPTED.

CHECKS PAYABLE TO : Action Photos of Hawaii Inc.

GRADUATE 8x10 SPECIAL	
1- 8x10 Individual w/ Diploma	Check box if ordering <input type="checkbox"/>
1- 8x10 Class Photo	
Postage \$8 <input type="checkbox"/>	Reg. \$38
FREE Pick Up <input type="checkbox"/>	\$25
DIGITAL GRADUATE SPECIAL	
1- Individual Photo w/Diploma with the copyright release	Check box if ordering Digital Image <input type="checkbox"/>
Email: _____	
*Great for using for announcements, social networking etc.	Reg. \$33
Postage \$8 <input type="checkbox"/>	\$20
FREE Pick Up <input type="checkbox"/>	

Please Print...

NAME: _____ PHONE #: _____

MAILING ADDRESS: _____
Street City Zip Code

EMAIL: _____

PAYMENT TYPE (circle one): CASH CC CHECK# _____ FREE Pick Up ☐ Postage \$8.00
AMOUNT ENCLOSED: \$ _____

When paying by check, NSF checks written to our company and the authorized state fee will be collected electronically or by draft.

Payment by Credit Card (Fill in ALL information and PRINT LEGIBLY)	
VISA \ MC (Decline Or Invalid Cards will not be processed)	
Name on Card: _____	Phone #: _____ CHECK ONE: () VISA () MASTER CARD
Card #: _____	Exp. Date: ____/____/____ CVC #: _____ Amount: \$ _____
Billing Address: _____	Zip Code: _____ Pkg: _____
Signature: _____	Senior Name: _____ King Kekaulike High School Commencement