



# The Pride

Port Charlotte High School Bands



New  
Dates

## Picture Dates

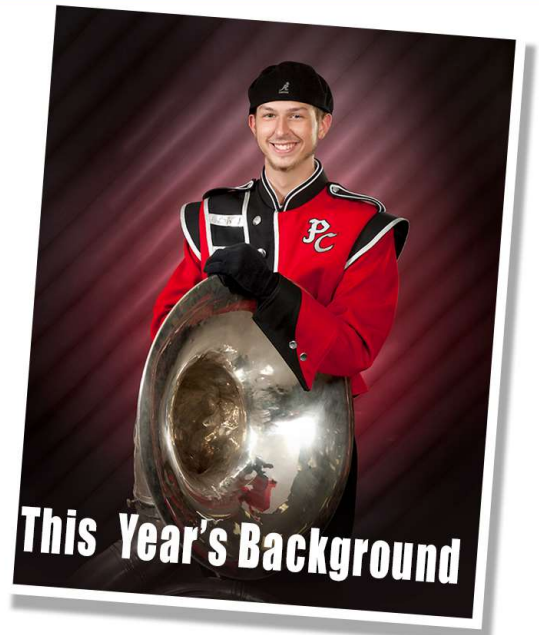
Marching: Friday Sept. 22nd

Orchestra: Tuesday Sept. 26th



Nickolson's is very pleased to have been asked to work with The Pride band this year. We are happy to be able to donate our service for the photographs to go into your band program.

In addition to the group pictures we are offering formal individual pictures of your son or daughter in uniform with instrument. As a parent I know how excited I am to have a nice portrait of my son in uniform.



**To order photographs fill out the attached envelope and send in on picture day with payment.**

The portraits are being offered on the prepay basis, only students who are purchasing photographs will be photographed individually. Everyone of course will be included in the group pictures.

If you want individual portraits or to purchase any of the groups or sectional groups please send in the attached envelope with payment on picture day. Send one envelope per band you would like to purchase pictures from.

Each package includes both an individual pose and the group pose of the whole band.

**Nickolson's Portrait Studio**

983 Tamiami Trail Port Charlotte FL 33953  
255.1888 [nickolsons.com](http://nickolsons.com)

# Group and Individual Band Packages

**Please select a package and return this envelope with payment on picture day. One envelope per band.**

**Marching Band**

**Concert Band**

PACKAGE A  
1-8x10 Group  
1-8x10 Ind.  
2-5x7  
8-Wallets  
\$40 \_\_\_\_\_

PACKAGE B  
1-8x10 Group  
4-5x7 Ind.  
4-3 1/2x5  
8-Wallets  
\$45 \_\_\_\_\_

PACKAGE C  
1-8x10 Group  
2-5x7 Ind.  
\$28 \_\_\_\_\_

Friends Pkg  
2 to 4 people  
4-3 1/2x5 12-Wallets  
\$20 \_\_\_\_\_  
*not an individual package*

Whole Band Group Pose  
1-8x10  
\$15 \_\_\_\_\_  
*not an individual package*

Sectional Groups 1-5x7 \$10  
Section name \_\_\_\_\_

Studio Use

**PAYMENT DUE ON PICTURE DAY**

Total \$ \_\_\_\_\_  
We accept cash or checks  
payable to Nickolson's

*return check fee is \$20*

Student's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ FL Zip \_\_\_\_\_

Phone \_\_\_\_\_ Grade \_\_\_\_\_

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**PAYMENT DUE ON PICTURE DAY**