

Initials:

Portrait Agreement



For School Years: 17-18 **18-19** 19-20 20-21 21-22

1 Year Agreement

2110 Overland Avenue Suite 120 Billings, MT 59102
Phone: 800-652-8590 Fax: 406-652-6428

Account:	Sage Valley Jr High School		Principal:	Terry Quinn	Email:	tquinn@ccsd.k12.wy.us		
Address:	1000 W Lakeway Rd		Secretary:	Dana Van Patten	Email:	davanpatten@ccsd.k12.wy.us		
City,St,Zip:	Gillette, WY 82718		YB Advisor	Lauren Seamans	Email:	lseamans@ccsd.k12.wy.us		
Phone:	307-682-2225	Fax:	307-687-7614	PD Contact	Dana Van Patten	Email:	davanpatten@ccsd.k12.wy.us	
Student Enrollment:	650	# Staff:	125	EDT Contact:	Jodi Wiley	Email:	jwiley@ccsd.k12.wy.us	
LID #	98094		# Classrooms:		Grade Levels:	7-8	Admin Software:	Powerschool
Colors:	Red/White/Blue	Mascot:	Eagles	Sibling Time:		Lunch Software:		
Website:	s.google.com/a/svjh.net/sage-valley-ju			Notes:		Library Software:		

Programs Selected:

Program	Date	Pay Method	Platform	Cams	Subjects	Program	Date	Pay Method	Platform	Cams	Subjects
Fall Underclass 0	TBD	Prepay	X1-1C	4-X1	7-8						
Fall Underclass 1	TBD	Prepay	X1-1C	1-X1	7-8						

Class Pic Info: Type: NONE Pay Method: Notes:

Fall Services:

Item Description	Qty	Code	Sort	HL	Need by	Item Description	Qty	Code	Sort	HL	Need by
SmileSafe Kids Card	1637		teacher-P0,1			Partial: Staff ID Card	1623Z		G - Grade0,1		
Class Directory pages w/name	2653		G - Grade0,1			Downloadable ImageStreamCD	1774		J - no Sor0,1		
Web Flash!, WebEase, Volumes	1610		G - Grade 1								
Big Picture	2796		N	1		Montage Poster CD	1660		J - no Sor 1		
Student ID Card w/barcode H-Lam	1628X		teacher-P0,1								

Lifetouch Yearbook:

Yearbook Program	Copies	Pages	Delivery Season	Agreement Term	Initials	Notes:
Webease Lite						

Value added services:

Item Description	Notes	Item Description	Notes
Montage Poster	Fall		
Big Pictures	2-Fall		

School Commission: Fall: \$1 per Package Spring: N/A

Notes, Special Requests & Promotions

Free Combs for all students. Complimentary Partners in Education Items. All portraits are guaranteed 100% by retake or refund. <https://sites.google.com/a/ccsd1schools.net/svjh/>

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Authorized School Representative

Date

Chris J. Goolsby
Lifetouch Representative

10/31/17
Date

MAM:	FOW:	AMC:	PRO:	EML:	SVT:
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PD:	RD:
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TEAM MEMBERS				COM: