

West Coast Imaging

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Student Discount Application

To qualify for a student discount, please:

- Fill out the left portion of this form COMPLETELY.
- Have your instructor fill in the right side of the form COMPLETELY.
- Make sure you both sign the form, and send it in with your order.
- Forms must be completely filled out and signed to qualify for the discount.
- Your discount will remain valid until the end of your school term.

WRITE THE DATE THIS SCHOOL TERM (QUARTER OR SEMESTER) ENDS: _____

STUDENT INFORMATION:

Name: _____

Address: _____

City, State, ZIP: _____

Phone and FAX: _____

Email: _____

Expected Graduation Date: _____

Major: _____

Minor: _____

I verify that I am a full-time student at an accredited University or art school. I am pursuing an associates, bachelors, masters or doctorate degree, and plan on pursuing photography or fine arts as a career, following the completion of my degree.

Student Signature _____

INSTRUCTOR INFORMATION:

Name: _____

University Name: _____

Title/Position: _____

Name of Course(s) You Teach: _____

Address: _____

City, State, ZIP: _____

Phone and FAX: _____

Email: _____

I verify that the student above is registered as a full-time student at my university, and is enrolled in one of my classes. This student is pursuing an associates, bachelors, masters or doctorate degree in photography or fine arts.

Instructor Signature _____