

JKCPHOTOGRAPHY LLC

Student Representative Questionnaire

Name	School	
Address	State	Zip
Phone #	E-mail	
Parent or guardian's name	Address if different	

1. Have you been contacted by any other studios to rep for them?
Y or N

If Yes, Which one's?

2. Why would you like to rep. for JKCPHOTOGRAPHY?

3. What will you do that will make you a great rep. for our studio?

4. Would you like to be compensated for recommending our studio to your friends and classmates for their senior portraits? Y or N

5. What activities or clubs (in or out of school) are you involved in?

6. What do you think of the portraits you have seen on our website (www.jkcphoto.net)?

7. What type of senior portraits would you like to have taken?

8. Where would you like to have your senior portraits taken?

9. Have you seen the senior portrait work of other photographers? If so, what did you like or dislike about it?

10. Are you willing to grant JKCPhotography permission to use your portraits in advertisements?
Y or N

I, _____, realize that this program is geared to help promote JKCPhotography, and I will not accept a representative position from any other studio. I also realize that I am under no obligation to purchase photographs or other products from JKCPhotography. Any violation of this agreement will terminate any commissions from referrals.

I also understand that as a Senior Representative, I am an independent contractor and am not an employee of JKCPhotography LLC

Applicant's signature _____

Parent/Guardian Signature _____