

STUDENT NAME:

SCHOOL BUILDING:

PARENT NAME:

PARENT PHONE #:

CHECK HERE [] IF YOU DO NOT WANT THIS ORDER SENT HOME WITH STUDENT (GIFT)

SAMPLE ORDER

Item	OTHER	YS	YM	YL	S	M	L	XL	2XL ADD \$	3XL ADD \$	Subtotal	NAME ADD \$5	Personalized Name - 9 Letter Max (LETTERS ONLY - ALL CAPS AND NO SYMBOLS)	NUMBER ADD \$3	#	Total
A 2						X					14	X	SMITH	X	20	22

ONE ITEM PER LINE ONLY • T-SHIRTS - ADD \$2 FOR XXL AND \$4 FOR XXXL • ALL OTHER ITEMS - ADD \$3 FOR XXL AND \$6 FOR XXXL • NAME AND NUMBER APPEAR AS WRITTEN

Item	OTHER	SIZES								Subtotal	NAME ADD \$5	Personalized Name - 9 Letter Max (LETTERS ONLY - ALL CAPS AND NO SYMBOLS)	NUMBER ADD \$3	#	Total	
		YS	YM	YL	S	M	L	XL	2XL ADD \$							3XL ADD \$
1											\$					\$
2											\$					\$
3											\$					\$
4											\$					\$
5											\$					\$
6											\$					\$
7											\$					\$
8											\$					\$
9											\$					\$
10											\$					\$
11											\$					\$
12											\$					\$
13											\$					\$



VER - 1.2c

OFFICE USE ONLY
58790

Grand Total \$