



**New Customer?** YES / NO (circle one)

How did you hear about us? \_\_\_\_\_

## Individual Order Form

PLEASE PRINT CLEARLY

Check here for change of address

BILLING ADDRESS		SHIPPING ADDRESS	
Organization or School		Full Name	
Full Name		Address (UPS delivery no PO Boxes please)	
Address (college students provide home address)		City/State/Zip	
City/State/Zip		Is this a residence ? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Phone No.\* \_\_\_\_\_ Email \_\_\_\_\_

\*Phone number is required to create your account.

Player/Guardian
  Coach
  Official
  Team
  School
  Booster Club
  Travel Team

ITEM #	COLOR CHOICE		SIZE	PRODUCT DESCRIPTION	QTY	PAGE#	COST/EA.	TOTAL
	1st	2nd						

**CHECK THE TYPE OF PAYMENT:**

Visa  MasterCard  Discover  Amex

Card Number: \_\_\_\_\_ Exp Date: \_\_ / \_\_

Name on card: \_\_\_\_\_ CVV: \_\_\_\_\_

Authorized Signature. \_\_\_\_\_

Please provide phone number if different from above: \_\_\_\_\_

Purchase Order Number: \_\_\_\_\_

<b>SUBTOTAL</b>	
<b>Shipping</b> (see website) <small>Taxable for PA residents</small>	
<b>6% PA tax</b> <small>(if applicable)</small>	
<b>TOTAL</b>	