

TEAM JERSEY ORDER FORM

ASSOCIATION: TEAM NAME:		COMPETITION DAY:	MON / TUE / WED / THUR / FRI (please circle)	
		VENUE/PARK:		
CONTACT PERSON:		DIVISION/AGE GROUI	P:	
PHONE:		_		
EMAIL:		_		
SPORTS PLAYING:	OZTAG TOUCH SOCCER OTHER	(please circle)		
** PL	YER NAMES & TEAM NAMES ARE AN EXTRA \$8. LAYER NAMES ON SUBLIMATED GARMENTS ARI EAM NAMES WILL BE PLACED ON THE FRONT O ** PLAYER NAMES WILL BE PLACED STYLE NAME SUBLIMAT	E AN EXTRA \$2.50 each - TEAM NA OF ALL GARMENTS UNLESS OTHERW ON THE BACK OF ALL GARMENTS *	MES ARE FREE ** /ISE SPECIFIED ** * FREIGHT	DUE DATE
	YES / N	10	SEND OR COMP PICK UP	ASAP
SIZE QTY	JERSEY NUMBER(S)	NAME REQUIRED	Unit Price	SUB TOTAL
PLEASE USE	E THE LETTER 'K' BEFORE KIDS SIZES	S and 'L' BEFORE LADIES S	IZES - eg K10 or	L12
				\$ -
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				\$ -
				\$ -
				\$ -
				\$ -
TOTAL UNITS: SUB TOTAL				\$ -
	ADDITIONAL COMMENTS / INS	STRUCTIONS:		FREIGHT YES NO TOTAL -



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