# Team T-Shirt/Sweatshirt Order Form – Fall 2010

Division: G/B:_____ U6/8/10/12/14/16/19: _____ Team Name:_____ Team #:_____

Name of person placing order:_____ Phone #:_____ E-Mail:_____

| | T - S h i r t s | | | | | | | | | S w e a t s h i r t s | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| NAME | Youth Small | Youth Med. | Youth Large | Adult Small | Adult Med. | Adult Large | Adult X-L | Adult 2X-L | Adult 3X-L | Youth Small | Youth Med. | Youth Large | Adult Small | Adult Med. | Adult Large | Adult X-L | Adult 2X-L | Adult 3X-L |
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| Quantity Ordered | | | | | | | | | | | | | | | | | | |
| TOTAL $$$$$ | | | | | | | | | | | | | | | | | | |

Initials of AYSO volunteer who accepted order:

TOTAL $$ AMOUNT: