

York Jr. High  
T-shirt Order Form  
Orders Due By OCTOBER 7<sup>th</sup>



A.



B

Student Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

First Period Teacher: \_\_\_\_\_

Shirt Design: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Hoodie Design: \_\_\_\_\_ Hoodie Size: \_\_\_\_\_

Total: \_\_\_\_\_ Method of Payment:

\_\_\_\_\_ Cash      \_\_\_\_\_ Check      \_\_\_\_\_ PayPal