

TEAM TEE ORDER FORM

BILL TO:

CONTACT _____
 ADDRESS _____
 CITY _____
 STATE _____
 ZIP CODE _____
 PHONE 1 _____
 PHONE 2 _____
 EMAIL _____

SHIP TO:

CONTACT _____
 ADDRESS _____
 CITY _____
 STATE _____
 ZIP CODE _____
 PHONE 1 _____
 PHONE 2 _____
 EMAIL _____

DESIGN # _____

TEAM NAME _____

TEAM SPORT _____

TEAM BALL _____ (if applicable)

TEAM COLORS _____

GARMENT SIZE/QUANTITY
TOTAL ITEM

ITEM	COLOR	YS	YM	YL	S	M	L	XL	XXL	XXXL	QUANTITY	PRICE	TOTAL \$
TEE													
LST													
HOODY													

BACK IMPRINT QTY _____ X \$ _____ = \$ _____

SUB TOTAL	
BACK IMPRINT	
RUSH CHARGES	
TOTAL SALE	



MC VISA # _____

EXP DATE _____ CVC2# _____ (3 digit # on back)

SIGNATURE _____

TO ORDER:

FAX: 1.515.987.7688

MAIL: Image Sport 1115 SE Westbrooke Dr. Waukee, IA 50263

PHONE: 1.800.919.0520