

2009 Walkathon T-Shirt Order Form

Use a dark pen. Please write clearly.

Student's Name: _____

Room # _____

Parent's Email Address _____

Teacher's Name: _____

<u>Sizes</u>	<u>Prices</u>
Youth YS (6-8) YM (10-12) YL (14-16)	\$10
Adult AS AL AXL AXXL	\$10

<u>Size</u>	<u>Qty</u>	<u>Cost</u>
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Number of Shirts: _____

Total Cost \$ _____

Please make checks payable to WVPTA. Please give this completed form to your child's teacher or drop it in the box in the office.

Any questions? Contact Susie Schmitz at jsschmitz@comcast.net.