



Intermediate Wardrobe Order Form

Swimmers Name: _____

Swimmers Team: _____

Parent Name: _____

Phone #: _____ Email: _____

Item (** items are new and mandatory for Intermediate swimmers)	Size (circle)	Quantity	Price
White Serinas Shirt	S M L XL		\$18
	YS YM YL YXL		
**Garnet Shorts	S M L XL		\$15
	YS YM YL YXL		
**Tshirt - White Serinas	S M L XL		\$10
	YS YM YL YXL		
**Garnet Suit (will be measured for appropriate size)			\$55
Black Suit (will be measured for appropriate size)			\$30
White Cap	One Size		\$2
Serinas Cap	One Size		\$5

Please write all checks to the Tallahassee Serinas with swimmers name on memo line.

TOTAL:

Orders must be submitted to the Serinas dropbox by **Friday, November 6, 2015.**

Payment must be received in full by **Monday, February 1, 2016.**

Items will be disbursed when payment is received in full and all items have arrived.

Treasurer use only

Check # _____ Amount: _____ Check # _____ Amount: _____ Check # _____ Amount: _____