

BROOKSIDE MIDDLE SCHOOL T-SHIRT ORDER FORM

Please write the number of shirts to the right of the size needed. More than 1 shirt may be purchased.

Student Name: _____ **Total Included:** _____

Short Sleeved Shirt

SIZE (\$7): YM _____ YL _____ AS _____ AM _____ AL _____ AXL _____

SIZE (\$8): 2X _____ **SIZE (\$10):** 3X _____

Long-sleeved shirt

SIZE (\$9): YM _____ YL _____ AS _____ AM _____ AL _____ AXL _____

SIZE (\$10): 2X _____ **SIZE (\$13):** 3X _____

