



T-shirt Order Form

Participant(s) Na	me:						
Parents Name:							
Phone number:_							
Show T-Shirt:	One T-Shirt	is include	with your r quantity	_	on(s). Plo	ease indicate t-shirt size an	d
	Youth S	Sm (6/8)	Med (10/	/12)	Lg (14-1	L6)	
Adult Sm	Med	_ Lg X	(L XXI	L*	XXXL*	(*pleas add \$5 for these size	s)
	Additional Sl	how Shirt orc	lers: Total Qt	ty x \$	\$25.00 = \$_		
	MYART C	• •	Shirts: (I			gistration fee)	-
	Youth Sm	n (6/8)	Med (10/	12)	Lg (14-	16)	
Adult Sm	_ Med	_ Lg X	(L XXI	L*	XXXL*	(*pleas add \$5 for these size	s)
			ditional shirt				
Credit Card							
	Ex	φ date	securi	ty code	E	Billing	
Addr	ess						
	Signature						