

SCCS ATHLETICS

P.E. UNIFORM PURCHASE FORM

STUDENT'S NAME: _____ GRADE: _____

_____ SHIRT (Indicate size) \$13.00ea

- _____ SMALL
- _____ MEDIUM
- _____ LARGE
- _____ X-LARGE
- _____ XX-LARGE

_____ SHORTS (Indicate size) \$13.00ea

- _____ SMALL
- _____ MEDIUM
- _____ LARGE

PLEASE BILL THE COST OF P.E. UNIFORMS PURCHASED TO MY SCHOOL ACCOUNT. I WILL BE RESPONSIBLE FOR PAYMENT OF THE CHARGES TO MY SCHOOL BILL IN ACCORDANCE WITH THE FINANCIAL POLICIES OF S.C.C.S.

PARENT SIGNATURE: _____ DATE: _____

PARENT COPY

STUDENT'S NAME: _____ DATE: _____

QUANTITY	ITEM	SIZE	COST
TOTAL			

PLEASE BILL THE COST OF P.E. UNIFORMS PURCHASED TO MY SCHOOL ACCOUNT. I WILL BE RESPONSIBLE FOR PAYMENT OF THE CHARGES TO MY SCHOOL BILL IN ACCORDANCE WITH THE FINANCIAL POLICIES OF S.C.C.S.