

OPTIONAL CLOTHING

Please hand in form to office by **August 23** with payment
(can etransfer dreamsgymnasticsacademy@gmail.com)

Name _____

| | | Y6 | YS | YM | YL | YXL | AXS | AS | AM | AL | Total \$ |
|---------------------|------|----|----|----|----|-----|-----|----|----|----|----------|
| Hoodie | \$50 | | | | | | | | | | |
| Joggers | \$45 | | | | | | | | | | |
| Racer Back Tank Top | \$28 | | | | | | | | | | |
| Baseball Tee | \$30 | | | | | | | | | | |
| Shorts | \$30 | | | | | | | | | | |
| Total # | | | | | | | | | | | |

| | |
|-------------|----------|
| Total Items | Total \$ |
|-------------|----------|

Office

| |
|-------------|
| Paid Date |
| Received By |

| |
|--------------|
| Payment Type |
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