You Are NOT Required to buy a shirt to compete

DUE SEPTEMBER 13th Return to your Media Center

The logo will in appear on the front of the shirt

School Name_____

Your Name_____

TOTAL Amount of Shirts*:**_____ ***X $11.00 Per shirt **= $**_____

Make checks payable to DVEF

Credit Card #:_____**Expiration Date:**_____**CVV:** _____

Address:_____**City:**_____**ZIP:**_____

Your Phone #:_____

Your Name:_____

Your Signature:_____

Circle your color choice:

Red Pink Neon Pink Purple Gray

Aqua Blue Royal Blue Neon Blue Neon Orange

Gold Neon Yellow Green Neon Green

Circle your size:

Child Small Child Medium Child Large Child X-Large

Adult Small Adult Medium Adult Large Adult X-Large