

2017 Team Gear ORDER FORM

Checks made payable to: **Reneé Moss for Rose City Tri Club**
Drop off checks at DASH or mail to Lacey at: 106 Imperial Drive, Thomasville, GA 31792

NAME	EMAIL ADDRESS	PHONE
STREET ADDRESS	CITY	USAT #

MENS

ITEM:	QUANTITY:	SIZE:	BY NOV. 23	BY DEC. 5
<input type="checkbox"/> TRI TOP		XXS-XXL	@ \$65 each = _____	@ \$75 each = _____
<input type="checkbox"/> TRI SHORT (8")		XXS-XXL	@ \$65 each = _____	@ \$75 each = _____
<input type="checkbox"/> CYCLE JERSEY		XXS-XXL	@ \$85 each = _____	@ \$95 each = _____

LADIES

<input type="checkbox"/> TRI RACERBACK TOP		XS-XL	@ \$70 each = _____	@ \$80 each = _____
<input type="checkbox"/> TRI ZIPPER TANK		XS-XXL	@ \$65 each = _____	@ \$75 each = _____
<input type="checkbox"/> TRI SHORT (6")		XS-XXL	@ \$65 each = _____	@ \$65 each = _____
<input type="checkbox"/> TRI SPORT BRA		XS-XL	@ \$35 each = _____	@ \$45 each = _____
<input type="checkbox"/> CYCLE JERSEY		XS-XXL	@ \$85 each = _____	@ \$95 each = _____
<input type="checkbox"/> RUN CAPRI		XS-XL	@ \$55 each = _____	@ \$65 each = _____

SUBTOTAL = _____

2017 PAID SPONSORS DEDUCT \$25 PER ORDER.

TOTAL PAYMENT SUBMITTED = _____

DATE SUBMITTED = _____

CASH CHECK RECEIVED BY = _____



**ROSE
CITY
TRI
CLUB**