



Dolvin Elementary PTA Spiritwear Order 2010 – 2011



Parent Name: _____ Phone #: (____) _____

Date: _____ Cell #: (____) _____

1. Student Name/Grade/Teacher: _____
2. Student Name/Grade/Teacher: _____
3. Student Name/Grade/Teacher: _____

Dolvin Spiritwear													
Item	Youth Price \$	Youth				Adult Price \$	Adult					Total \$	Qty Rec'd
		S	M	L	XL		S	M	L	XL	XXL		
Gray T-shirt	\$15					\$15						\$	
Girl's T-shirt	\$15					\$15						\$	
Long Sleeve shirt	\$16					\$16						\$	
Hoodie	\$20					\$23						\$	
Zip Hoodie	\$22					\$25						\$	
Shorts	\$15											\$	
Car Magnet	\$5											\$	
TOTAL PURCHASE												\$	

PTA Representative _____ Paid, not received: _____

Receipt

Last Name: _____ **Date:** _____

Amount Paid: _____ **Payment Type:** CASH CHECK

Check Number _____
(Make checks payable to: **Dolvin PTA**)

PTA Representative _____ Paid, not received: _____

**PLEASE FEEL FREE TO VIEW THE 2010-2011 SPIRITWEAR ON THE DOLVIN PTA WEBSITE AT
<http://www.dolvinpta.org>**