



# Screenprinted T-shirts Order Worksheet

## Turnaround

ORGANIZATION OR GROUP NAME

YOUR FULL NAME

**Standard Turnaround**  
Your order confirmation will show the expected ship date. See website for ship times.

SHIPPING ADDRESS FOR ORDER

DAYTIME PHONE NUMBER

**Must Have By This Date:**  
(Rush Fees May apply)

CITY STATE

E-MAIL ADDRESS

We will contact you if we can't make this date.

Residential shipping address?  Yes  No ZIP CODE

Require signature for delivery?  Yes  No

## Garment Information

ITEM #	GARMENT DESCRIPTION	GARMENT COLOR	YS	YM	YL	S	M	L	XL	XXL	3XL	4XL	5XL	PIECES	UNIT PRICE	LINE TOTAL

NOT ALL COLORS OR GARMENTS COME IN ALL SIZES

Subtotal	\$
+Florida Sales Tax If applicable, only applies to orders shipped to FL.	\$
<b>Total</b>	<b>\$</b>

## Design Information

Text to appear in design

Mascot, graphic or CA#

Please indicate the correct design location:

LEFT CREST     FULL FRONT  
 FULL BACK     OTHER

No  Yes **SP**

## Payment Information

Visa     Mastercard  
 AMEX     Discover

Credit Card Number

Expiration Date    Security Code

I Have Enclosed A Check     I Will Mail A Check

NOTES/SKETCHES (Email name lists to questions@classb.com)