FOR OFFICE USE ONLY	
Date Received:	
Last Day to Order:	
Staff Initials:	

PAYMENT FORM

PAGE

1
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PROGRAM APPAREL SUBMISSION - HOODIE

Program Name:

Name:

Name:

Phone #:

Email:

Student Coordinator

Name:

Name:

Phone #:

Email:

NAME	STUDENT ID	TELEPHONE #	SIZE (SM-3XL)	SIGNATURE UPON PAYMENT	TRANSACTION#	DATE OF PAYMENT	CASHIER'S INITIALS
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

* IMPORTANT INFORMATION, PLEASE READ BEFORE SENDING IN THE ORDER*

Notes:

- 1) As the **Student Coordinator**, you agree to be the point of contact and be in charge any communication for this order, You will also be in charge of distributing the hoodies to your classmates when they are ready for pickup. A second Coordinator can be chosen at the time of submission the event that the **Student Coordinator** is unable to pick up the
- 2) **DO NOT** write on the back of this form. If you require additional space, please print additional forms and staple together.
- 3) Minimum order quantity is 12 items.
- 4) ALL PROGRAM APPAREL ARE FINAL SALE

ANY QUESTIONS PLEASE CONTACT: shop@nait.ca or in person at shop AT NAIT - Main Campus

Total - For office use of	FOR OFFICE USE ONLY
SM	Email/Call date:
MD LG	
XL	PICKED UP
2XL	DATE:
3XL	
TOTAL	SIGN:

