



IMPACT Early College High School Spirit Wear

Student Name: _____

Grade: _____ Phone: _____

Size (Circle your size)	Qty	Cost	Amount Due
S M L XL 2X 3X		\$10	
S M L XL 2X 3X		\$10	
S M L XL 2X 3X		\$10	

Total Due \$ _____

Amount Paid \$ _____

Cash _____ Check # _____