



ALLSTAR CUSTOM APPAREL Team/League Order Form

- Basketball
 Volleyball
 Football

League Name: _____ Phone: _____

Contact Name: _____ Email: _____

****PLEASE COMPLETE ONE FORM PER TEAM/COLOR**

Team Name/Division: _____

Check all that apply:

<i>Apparel:</i>	<input type="checkbox"/> Performance Tee	<input type="checkbox"/> Single Jersey	<input type="checkbox"/> Reversible Jersey	<input type="checkbox"/> Shorts
<i>Color(s):</i>				

Team Sponsor(s): _____ N/A

Player Apparel: *if YXS/YXL is not available the item will be ordered as the next available size

Tee/Jersey

YOUTH SIZES

YXS:	
YS:	
YM:	
YL:	
YXL:	

ADULT SIZES

AXS:	
AS:	
AM:	
AL:	
AXL:	
2XL:	
3XL:	

Shorts

YOUTH SIZES

YXS:	
YS:	
YM:	
YL:	
YXL:	

ADULT SIZES

AXS:	
AS:	
AM:	
AL:	
AXL:	
2XL:	
3XL:	

Coaches Apparel:

Coaches

ADULT SIZES

AXS:	
AS:	
AM:	
AL:	
AXL:	
2XL:	
3XL:	

NOTES

OFFICE USE ONLY

STYLE # _____

DUE DATE: _____

TEE/JERSEY: # _____

SHORTS: # _____