

GRACEVILLE LETTER JACKET

SIZING DATE: WEDNESDAY SEPTEMBER 14th, 12:15 IN LOBBY
AFTER THIS DATE PLACE ORDER AT:
www.hessawards.com

E-mail or call with questions:
JERRY "COACH HESS" HESTER
428 TEN LAKE DR
Defuniak Springs, FL 32433
850-259-8122
hess@maverickawards.com
www.hessawards.com

Student Name	CELL Number:
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Ship to Address:	Parent Cell:
	Parent E/Mail:

OFFICIAL LETTER JACKET
BODY: BLACK
SLEEVE: ORANGE
TRIM: BLACK, WHITE, ORANGE

Jacket Size					Alterations						
<input type="radio"/> XXS	<input type="radio"/> XS	<input type="radio"/> S	<input type="radio"/> M	<input type="radio"/> L	Body	<input type="radio"/> 2" <input type="radio"/> 4"	Lengthen	Sleeves	<input type="radio"/> 2" <input type="radio"/> 4"	Lengthen	
<input type="radio"/> XL	<input type="radio"/> 2XL	<input type="radio"/> 3XL	<input type="radio"/> 4XL			<input type="radio"/> 2" <input type="radio"/> 4"	Shorten		<input type="radio"/> 2" <input type="radio"/> 4"	Shorten	
Front of Jacket										Jacket Price	\$ 115.00
Sleeves: <input type="radio"/> Vinyl <input type="radio"/> Leather										LEATHER \$75	\$
"G" Sport Insert (1 @ NO CHARGE): OR BAND INSERT Additional Bars (\$3) Insert (\$5):										Bars:(\$3)	\$
Name on Front: <table border="1" style="display:inline-table; width:100%; height:20px;"></table>										Front Name:	\$ Included
Graduating Class Year: <table border="1" style="display:inline-table; width:100%; height:20px;"></table> UNDER NAME RIGHT FRONT										Class of:	\$ 10.00
Back of Jacket											
"NAME " ON JACKET BACK											\$ 40.00
Sleeve Patches											
"TIGER" MASCOT (Left Sleeve):											\$ 25.00
Jersey Number Patch (Right Sleeve):											\$ 25.00
Position Patch (Right Sleeve): or BAND PATCH (FOR BAND)											\$ 25.00
Additional Sleeve Patches:										Add \$25	\$

OTHER PAYMENT METHODS: Jerry Hester
VENMO @coachhess

\$100 DEPOSIT REQUIRED TO ORDER ON SIZING DAY
ONLINE ORDERS FULL PAYMENT www.hessawards.com

Make Checks Payable to: HESS AWARDS					Cash () Check () Credit Card + 4%		Subtotal: Shipping : \$20.00 Total: Payment: Balance:	
CREDIT CARD PAYMENT IN FULL					Credit Card Number <table border="1" style="width:100%; height:20px;"></table>			
					Name on Card: _____ Exp. Date: <table border="1" style="display:inline-table; width:40px; height:20px;"></table>		JACKET DELIVERY: IN 8 TO 10 WEEKS	
Billing Address: _____ Sec Code: <table border="1" style="display:inline-table; width:40px; height:20px;"></table>								