

2009 Zone Team Equipment Order Form

Please complete the information below

Swimmer's name _____

Shipping address _____

Parent e-mail (in case we have questions) _____

<u>Item</u>	<u>Quantity</u>	<u>Price</u>
Middle Atlantic Zone Team Parka <i>(All sizes are Adult)</i>		
____S ____M ____L ____XL	_____	\$145
Middle Atlantic Zone Team Backpack	_____	\$ 50
Total		\$ _____

Make check payable to **Middle Atlantic Swimming**. Mail check and completed form to

Middle Atlantic Swimming
Attn: Zone Order
2150 New Castle Avenue
New Castle, DE 19720

Please allow 8-12 weeks for delivery.