



EHS Band Boosters
Wind Suit Jacket Order Form

Name of Student: _____

Grade: _____

Contact Info _____
(email or phone):

Wind Suit Jacket size: _____
(small, medium, large, x-large, xx-large)

For Treasurer's Use Only

Amount received: \$_____ Date received: _____ Date deposited: _____

Cash_____ Check_____ Check Number_____

Treasurer's Signature_____ Date_____