

## DFHNC Family Festival & Walk – T-SHIRT ORDER FORM

Team Name: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Funds Raised: \_\_\_\_\_

Email: \_\_\_\_\_

Color Selection: \_\_\_\_\_  
(see color chart)

Number of Shirts in each size (should equal total # shirts ordered):

Adult S: _____	Youth XS* (4): _____
Adult M: _____	Youth S* (6-8): _____
Adult L: _____	Youth M* (10-12): _____
Adult XL: _____	Youth L* (14-16): _____
Adult 2XL: _____	
Adult 3XL: _____	
Adult 4XL: _____	

*\*NOTE: some colors may not be available in youth sizes. We will contact you if your order is affected.*

**Total # Shirts Ordered:** \_\_\_\_\_

Special Instructions:

Return completed forms to DFHNC by mail, fax, or email:

**Bleeding Disorders Foundation of North Carolina**

**260 Town Hall Drive, Suite A**

**Morrisville, NC 27560**

*fax: 919-319-0016*

*email: festival@bleedingdisordersnc.org*