

Press firmly. Use medium black or blue ballpoint pen. All orders will be audited and errors corrected.

Loose Patch Order

FIRST NAME										LAST NAME																			
HOME ADDRESS															APT. #														
CITY										STATE					ZIP CODE					AREA CODE					PHONE NUMBER				
EMAIL ADDRESS															AREA CODE					CELL / ALT. PHONE NUMBER									
SCHOOL NAME										ORGANIZATION										DATE									

**SIZE:** (Circle One) YL YXL X Small Small Medium Large XL 2XL 3XL 4XL 5XL  
**SLEEVE LENGTH** (Circle One) Lengthen 1" 2" 3" Shorten 1" 2" 3"  
**BODY LENGTH** (Circle One) Lengthen 1" 2" 3" Shorten 1" 2" 3"  
 Approval of Size \_\_\_\_\_

1. WWW.JACKETSTODAY.COM WWW.JACKETSTODAY.COM WWW.JACKETSTODAY.COM WWW.JACKETSTODAY.COM

<input type="checkbox"/> MEGA PACKAGE \$123.80	<input type="checkbox"/> DELUXE PACKAGE \$98.85	<input type="checkbox"/> CLASSIC PACKAGE \$76.90	<input type="checkbox"/> BASIC PACKAGE \$54.95
MONOGRAM NAME ON CHEST MONOGRAM NAME ON COLLAR GRADUATION YEAR DATE MASCOT PATCH CHOICE OF SLEEVE PATCH #1 CHOICE OF SLEEVE PATCH #2	MONOGRAM NAME ON CHEST MONOGRAM NAME ON COLLAR GRADUATION YEAR DATE CHOICE OF SLEEVE PATCH #1 CHOICE OF SLEEVE PATCH #2	MONOGRAM NAME ON CHEST MONOGRAM NAME OF COLLAR GRADUATION YEAR DATE CHOICE OF SLEEVE PATCH	MONOGRAM NAME ON CHEST MONOGRAM NAME ON COLLAR GRADUATION YEAR DATE

2. **AWARD LETTER:**  Make Letter  Letter Enclosed  
 Insert on Letter: \_\_\_\_\_

PRICING
1. _____
2. _____
3. _____
4. _____
5. _____
5A. _____
5B. _____
5C. _____
5D. _____
5E. _____
5F. _____
6. _____

3. **EMBROIDERED NAME ON FRONT CHEST** \_\_\_\_\_

4. **BACK OF JACKET OPTIONS** (Script font is the default)  
 \_\_\_\_\_

5. **SLEEVE PATCH CHOICES FOR PACKAGES, ADDING TO PACKAGES, AND INDIVIDUAL ORDERS**

Graduation Year Date:        
 2 Digits                      4 Digits

Mascot: \_\_\_\_\_  Position: \_\_\_\_\_  
 (sleeve)  
 Jersey #1: \_\_\_\_\_  w/Sport Insert: \_\_\_\_\_  
 Jersey #2: \_\_\_\_\_  w/Sport Insert: \_\_\_\_\_

<b>PATCH DESCRIPTION</b>	<b>PATCH LETTERING</b>	
A		
B		
C		
D		
E		
F		

6. **SPECIAL INSTRUCTIONS:** \_\_\_\_\_ Add'l Sewn On \_\_\_\_\_

7. **PAYMENT OPTIONS**  Visa  MC  Discover  AMEX

ACCOUNT NUMBER: \_\_\_\_\_

Print Cardholder's Name: \_\_\_\_\_  
 X  
 Cardholder's Signature Required: \_\_\_\_\_  
If cardholder's billing address is different from above student's address, fill out information below.

Cardholder's Billing Address: \_\_\_\_\_

EXPIRATION DATE	
CASH	\$ _____
CHECK	\$ _____
CHECK NUMBER	\$ _____
WIRE APPROVAL	\$ _____

PRICE	
+ SHP / HDL	8.95
<b>SUBTOTAL</b>	
+ TAX	
<b>= TOTAL</b>	
- DEPOSIT	
<b>BALANCE DUE</b>	

**COMPETITIVE EDGE LETTER JACKETS**  
 11937 STARCREST DR.  
 SAN ANTONIO, TX 78247  
 (210) 403-9400 phone  
 (210) 377-0109 fax

You, the buyer, may cancel this transaction at any time prior to midright of the third business day after the date of this transaction. See the notice of cancellation form for an explanation of this right. Postal and handling charges may be added.