Interform®

Polo Order Form

IN HANDS DATE

Company Name_____ Bill To _____

Order By_____ P.O._____ Phone _____ Email _____

Ship To _____ Ship Method ☐ Will Call ☐ UPS Ground ☐ UPS Next Day ☐ UPS 2 Day ☐ UPS 3 Day

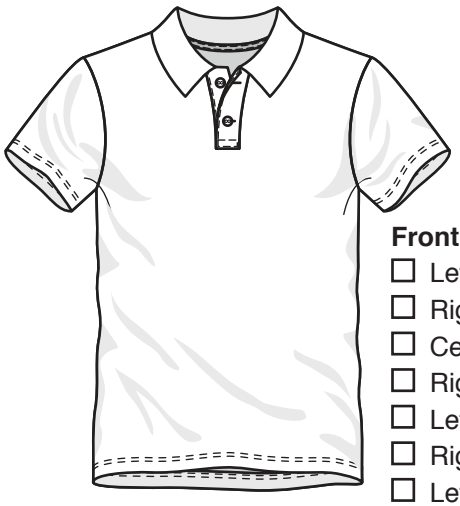
Total Quantity	Item #	Description	Color	QUANTITY ADULT									QUANTITY YOUTH				
				XS	S	M	L	XL	2X	3X	4X	5X	XS	S	M	L	XL

Special Instructions (Thread or Ink Color Specs)

☐ Embroider: Thread Colors _____

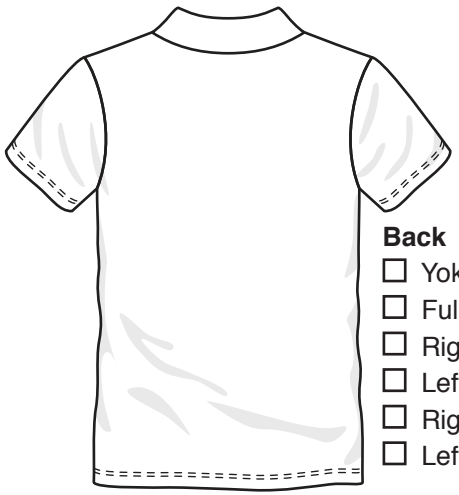
☐ Screen Print: Ink Colors _____

Please Indicate Below the Location(s) for Screenprint or Embroidery.



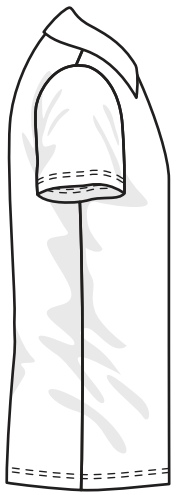
Front

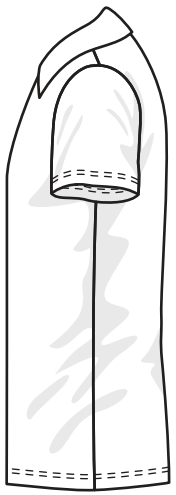
- ☐ Left Chest
- ☐ Right Chest
- ☐ Center Chest
- ☐ Right Shoulder
- ☐ Left Shoulder
- ☐ Right Bottom
- ☐ Left Bottom



Back

- ☐ Yoke
- ☐ Full Back
- ☐ Right Shoulder
- ☐ Left Shoulder
- ☐ Right Bottom
- ☐ Left Bottom



☐ Right Sleeve

☐ Left Sleeve