Interform®

T-Shirt 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

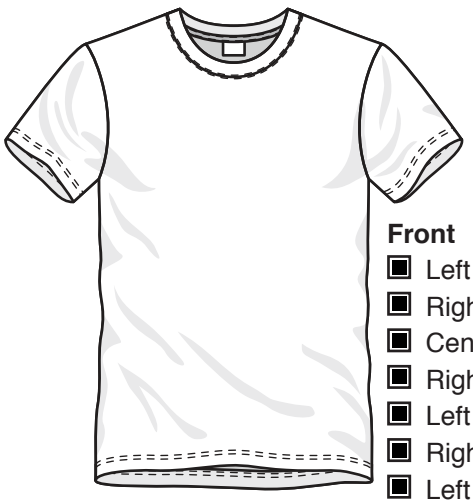
Total Quantity	Item #	Description	Color	QUANTITY ADULT									QUANTITY YOUTH				
				XS	S	M	L	XL	2X	3X	4X	5X	XS	S	M	L	XL

Special Instructions (Thread or Ink Color Specs)

■ Embroider: Thread Colors _____

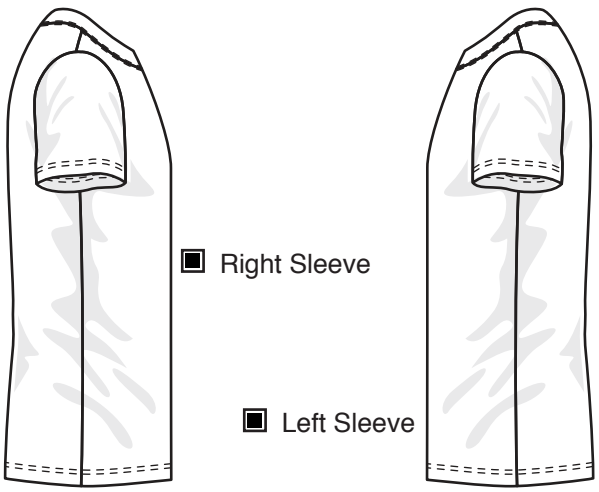
■ Screen Print: Ink Colors _____

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