ORDER FORM

NAME: _____

ADDRESS: _____

CITY : _____

PHONE : _____

E - MAIL: _____

ITEM	QTY.	PRICE	SIZE ie; 1-YS, 2-AM	TOTAL
CLCF HOCKEY SHELLS		$35 ea.		0
CLCF RINK BLANKET		$60 ea.		0
			TOTAL	0

Make Checks Payable to CLCF Hockey