

2013 New Mexico Merchandise and STATE RECEPTION Order Form for Nationals - Cleveland, OH

(Please check one) I am a: First Time Athlete Returning Athlete

| SIZES (MEASUREMENTS IN INCHES) | M | L | XL | 2X | 3X |
|-----------------------------------|-------|-------|-------|-------|-------|
| Jacket (chest) | 38-40 | 42-44 | 46-48 | 50-52 | 54-56 |
| Pants (waist size) | 32-34 | 36-38 | 40-42 | 44-46 | 48-50 |
| T-Shirt unisex | | | | | |
| Cap or Visor - One size fits all | | | | | |
| Swim Cap - One size fits all | | | | | |

| ITEM | PRICE/EA. | SIZE | QUANTITY | <i>Total Cost</i> |
|--------------------------------------|-----------|------|----------|-------------------|
| Wind Suit: First Time Athlete | \$ 60.00 | | | \$0.00 |
| Jacket | | | | |
| Pants | | | | |
| T-Shirt | | | | |
| Wind Suit: Returning Athlete | \$ 80.00 | | | \$0.00 |
| Jacket | | | | |
| Pants | | | | |
| T-Shirt | \$ 10.00 | | | \$0.00 |
| Cap - One size fits all | \$ 10.00 | | | \$0.00 |
| Visor - One size fits all | \$ 10.00 | | | \$0.00 |
| Grand Total | | | | \$0.00 |

ALL ORDERS ARE FINAL AND MUST BE PAID FOR IN ADVANCE

DEADLINE TO ORDER MERCHANDISE IS MAY 10, 2013

| | | | | |
|-----------|---------|--|--|--------|
| Lapel Pin | \$ 1.00 | | | \$0.00 |
| Swim Cap | \$ 5.00 | | | \$0.00 |

| | | | | |
|-------|------|--|--|------|
| Patch | FREE | | | FREE |
|-------|------|--|--|------|

DEADLINE TO ORDER TICKET(S) FOR STATE RECEPTION IS JULY 12, 2013

| | | | | |
|------------------------|----------|--|--|--------|
| State Reception: Self | \$ 8.00 | | | \$0.00 |
| State Reception: Guest | \$ 20.00 | | | \$0.00 |

Total Amount Due \$0.00

PAYMENT INFORMATION

Local Game Site/County: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Daytime Phone: _____

Cell Phone: _____

I am enclosing a check or money order made payable to New Mexico Senior Olympics

Please bill my Credit card

I authorize New Mexico Senior Olympics to bill my credit card for the amount indicated

Signature

Print Name as it appears on card

Check one: Mastercard VISA American Express Discover

_____-_____-_____
Card Number

____/____/_____
Expiration Date

Security Code

SEND PAYMENT TO:
NEW MEXICO SENIOR OLYMPICS, INC.
 PO BOX 2690
 ROSWELL, NM 88202-2690
 1-888-623-6676 nmso@nmseniorolympics.org