CCRA Volleyball Championship T-Shirt Order Form

Church Name: _				
Contact Person /	Phone Numb	er:		
League / Divisior	ո Won:			
Color of Shirt:				
Color of Screen	Print:			
Size: Small	Medium	Large	X-Large	XXL
(The league will your church for the	•		want more tha	n 10, we will bill
Please complete three (3) days af			•	
Steve Joseph PO Box 4505 Charleston, WV	25364-4505	Fax	x Number: (304) 346-4999