

Customer: _____
Email: _____
REQ date: _____

FELT BACK NUMBER ORDER FORM

SIZE

- Adult 12" Shield
- Youth 10" Shield
- Custom

Please use the instructions section at the bottom right to explain shape and size.

TOTAL

Sequence

- 1 01

Non-consecutive
Please indicate sequence in the instructions section below or e-mail a spreadsheet

COLORS

- Color 1 _____
- Color 2 _____
- Color 3 _____
- Color 4 _____
- Number Color _____

LOGO PLACEMENT

MAIN LOGO

- Top Center
- Special Instructions
- _____
- _____
- _____

SPONSOR LOGO

- Center Under Main
- Under Number
- Top Left
- Top Right

CONTESTANT NAMES

- YES NO
- Contestant Name Color _____
- Last Name (LAMM)
- First Initial Last Name (A LAMM)
- First Initial Period Last Name (A. LAMM)

Note: If names used, e-mail spreadsheet with names, and #.

BRASS EYELETS

- None
- Top Corners/Bottom Center
- Top Corners
- Special Instructions
- _____
- _____
- _____



Instructions
