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## **Butler Hockey Club 2018-19**

Player Name	Team (MS, JV, Varsity)		
		λ.	
Email	Parent Name		
Player # (Assigned by Club)	Phone Contact		Year of Birth
REQUIRED & OP	TIONAL ITEMS		
tems on this page are REQUIRED by the Club for all NEW Players (or if you had nave questions before you place your order, you may contact a K&B Outfitters repr	ave outgrown or need to replace resentative at 724-266-1133.	your Jerseys, Socks or Pa	nt Shell). If you
Custom Game Day Jerseys (required for all teams)  Jersey Si	ize Style	Jersey Pricing (each)	Item Total
Youth - Sm Med Lg XL	Home		
Adult - Sm Med Lg XL 2XL	Road	Sizes to XL - \$107 per For 2XL - Add \$3	
GOAL CUT - Adult Sizes Sm - Lg - XL - 4XL	GOAL GOAL	For Goal Cut - Add \$7	•
Custom Knit Hockey Socks (required for all teams) Sock Siz		Sock Pricing (each)	Item Total
Society Council (Coquined for all (Callis)	ze Style	Sock Fricing (each)	item rotai
CITES (consess) Vestala (2011) Interest dista (2011) Add 14 (2011)	Home	All Sizes	
SIZES (approx) - Youth (22") - Intermediate (26") - Adult (30")	Road	\$13 pair	
size			\$
Hockey Pant Shell (required for all teams)	Size	Pant Shell Pricing	Item Total
Varith VVCm VCm Cm Mad La		All Sizes	
Youth XXSm XSm Sm Med Lg			
Adult Sm Med Lg XL 2XL	Shell Size	\$44	\$
OTHER OPTIONA	L MATERIALS	CARLETTIC AT	
	1807		
CUSTOM HOCKEY BAG 36" Player Bag - 40" Goalie Bag		36" Player Bag - \$105	
30 Player Day 40 Goalle Day		40" Goalie Bag - \$110	•
Payment Info	Bag Size		\$
	CONTRACTOR OF STREET,		
ORDERS RECEIVED July 1s will be Shipped directly to the			
will be Shipped directly to the	ne member		Sub-TOTAL
		If your Sub-Total is \$200 or more,	
Credit Card #	Card EXP DATE	Shipping is FREE	6% PA Sales Tax
		If your Sub-Total is Less	
Name of Card Holder	Card Security #	than \$200 SHIPPING IS \$6.99	SHIPPING FEE
	Out a Security #		SHIPPING FEE
ard Holder Street Address, City, State & Zip PARENT/GUARDI	AN SIGN OFF		TOTAL
By signing below, I am confirming that I have carefully read over the form and agree with the Si; lameplate and the Player Number Choices (in order of preference).	NAME OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY.	spelling of the Name to be appli	ed to the jersey
Print Name Here	Sign Name Here		
Make Checks out to K&B Outfitters - Fax form to 412-202-7777 -OR-	- Scan and email completed form	to ThePenaltyBox@comcast.net	