NAME	CHILD SIZES - $10			ADULT SIZES - $15				PLUS SIZES - $20		PAID
	6-8	10-12	14-16	S	M	L	XL	XXL	XXXL	

CUT OUT form below and mail with payment. **RETAIN** top half for your records and distribution needs.

Caring for Kids T-shirt order form

DEADLINE: MARCH 16, 2012

Group/Company/Dept. _____

Name or Group Contact Name _____

Address _____ City, State, ZIP _____

Phone _____ E-mail _____

☐ **Charge my credit card:** *Name on card* _____

Card # _____ *Exp. date:* _____

☐ **Check enclosed** (*Payable to Geisinger Health System Foundation*)

Quantities	Total	Cost
Child: S___ M___ L___	____ x $10 =	_____
Adult: S___ M___ L___ XL___	____ x $15 =	_____
Plus: 2XL___ 3XL___	____ x $20 =	_____

Total amount enclosed: _____

☐ YES! We are ordering at least 100 T-shirts. Please include our company/group name as listed below on our shirts:

_____

Mail BOTTOM section of order form to:

Children's Miracle Network at Geisinger
Attn: Caring for Kids
100 N. Academy Ave.
M.C. 50-20
Danville, PA 17822