

# KMDI Destination Imagination Regional T-Shirt Order Form

***One Order Form Per Team/ONE CHECK PER ORDER***

**Order Form and Payment Due to Denise Ewe by Friday, January 4, 2019**

**If mailing payment, please send to 351 Streamside Court Grafton, WI 53024**

School District: \_\_\_\_\_

School: \_\_\_\_\_

Challenge: \_\_\_\_\_

Team Membership #: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Checks payable to KMDI

Team Members & Managers Names	Youth Sizes			Adult Sizes (M=Mens / W=Womens)					T-Shirt \$10.00 each	Individual or Team Name on Back (optional) \$3.50 each	Logo on Back (optional) \$2.50 each	Logo Screen Fee \$20 divided by number of shirts ordered	Total Due per Shirt	Check # or Cash
	Sm 6-8	Med 10-12	Lg 14-16	Sm	Med	Lg	XL	XXL +2.00 Mens only						
DI Team Supporter Shirts														
<b>PAYMENT MADE OUT TO KMDI <span style="color: red;">MUST</span> ACCOMPANY ORDER FORM</b>												<b>TOTAL AMOUNT DUE</b>	<b>\$</b>	

The screen fee is a one time fee and can be divided by an entire school if the logo is the same.

If your school submitted a screen last year, you needn't pay the fee this year.

\* Attach a copy of the Logo and/or Names you would like on the back of the shirts if applicable.

\* You will be contacted regarding pick-up when your t-shirt order is complete.

\* T-SHIRT BUYOUT OPTION \$50/TEAM - If your team decides not to participate in ordering the KMDI T-Shirts, sign and attach \$50 check payable to KMDI. Please include your team number on the check and mail to address above.

Signature: \_\_\_\_\_

**Contact Denise Ewe with any questions at [denise.ewe@wisconsindi.org](mailto:denise.ewe@wisconsindi.org)**