



UNIFORM ORDER

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

UNIFORM SIZE: (please input height in centimeters) _____ Qty _____

UNIFORM SIZE: (please input height in centimeters) _____ Qty _____

UNIFORM SIZE: (please input height in centimeters) _____ Qty _____

UNIFORM SIZE: (please input height in centimeters) _____ Qty _____

Total: \$40.00 x () = _____

Please pay for your uniform in advance. If you are paying by check, please make it payable to Lakeside Seikido. This uniform will belong to you and it will be your responsibility. Lakeside Seikido does not assume responsibility for lost or stolen items. Please be sure to clearly mark all your belongings.

Parent/Guardian

Students signature

Dated: _____