

NB: EXAMPLE

E.S LE GRANGE SCHOOL
SCHOOL UNIFORM ORDER FORM



NAME OF LEARNER: _____

CLASS: _____

<u>PARENT NAME:</u>	
<u>PARENT E-MAIL:</u>	
<u>PARENT PHONE:</u>	
<u>DATE:</u>	

	PRICE	S	M	L	XL	XXL		
• TRACKSUIT JACKET								
• TRACKSUIT PANTS								
• GIRLS SKIRT								
• JERSEY								
• PULLOVER JERSEY								
							TOTAL:	

****ALL ORDERS MUST BE PAID IN FULL WHEN ORDER IS PLACED***

Questions - Contact Teacher Marelette at 071 247 3969 or e-mail the school at fin@espotch.co.za

PLEASE USE YOUR CHILD'S NAME AND SURNAME AS REFERENCE

Please send your proof of payment to fin@espotch.co.za