

**Men's
Intercollegiate
Gymnastics
Support
Program, Inc**

*In cooperation with
and endorsed by*



Advisory Board

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T-SHIRT ORDER FORM

"College Gymnastics...tuned In"

Name: _____	Size:	Quantity:
Address: _____	CS	_____
City: _____	CM	_____
State: _____ Zip: _____	CL	_____
Phone(____) ____ - _____	AS	_____
E-mail: _____	AM	_____
	AL	_____
	AXL	_____
	A2XL	_____
	A3XL	_____

Cost: \$20/t-shirt Total number of t-shirt: _____
Total cost enclosed: (# of t-shirts X \$20): _____
Check Payable to: MIGS Program

Send to: MIGS Program
5215 3rd Avenue South
Minneapolis, MN 55419