


**Complete, Scan & Email to your Team Manager.**

<b>Player Name:</b>	<b>STORM FC</b> <b>COMPETITIVE</b> <b>UNIFORM ORDER FORM</b> <i>Uniforms . Winter Wear . Gear</i>	 <small>dynorth pell ny a dos warbarth warbarth rŷ a wrā sowgny</small>
<b>Parent Name</b>		
<b>Street Address:</b>		
<b>City &amp; Zip:</b>		
<b>Phone:</b>	<b>Team Name:</b>	
<b>Email:</b>	<b>Coaches Name:</b>	

**Returning Player - \$15 Practice Tee**

ITEM	Sizes	M/W	QTY	\$	QTY	TOTAL
<b>Practice Tee</b> <i>Dri Fit Training Tee</i>	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$15		\$

**Package A: \$260 (Individual Retail Cost: \$281)**

ITEM	Sizes	Mens Womens	QTY in Packet	Extra/Reorder		TOTAL
				\$	QTY	
<b>Home Jersey</b> <i>XARA Club Jersey (BLK)</i>	__YM __YL __AS __AM __AL __AXL		1	\$69		\$
<b>Away Jersey</b> <i>XARA Club Jersey (RED)</i>	__YM __YL __AS __AM __AL __AXL		1	\$69		\$
<b>JB OCT Jersey</b> <i>XARA Tranmere (Pink)</i>	__YM __YL __AS __AM __AL __AXL		1	\$50		\$
<b>Game Shorts</b> <i>XARA Club Shorts (BLK)</i>	__YM __YL __AS __AM __AL __AXL		1	\$38		\$
<b>Practice Tee</b> <i>Dri Fit Training Tee</i>	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$35		\$
<b>Game Socks</b> <i>Storm Logo Socks</i>	_____ S (Youth 10-3) _____ M (Youth 4-9/Ladies 3-8/Mens 4-9) _____ L (Ladies 9-12/Mens 10-13) _____ XL (13+)	Unisex	1	\$20		\$
<b>Competitive Player Package A Total:</b>						\$

**Package B - Includes All Items From PKG A: \$495 (Individual Retail Cost: \$566)**


ITEM	Sizes	Mens Womens	QTY in Packet	Extra/Reorder		TOTAL
				\$	QTY	
<b>Warmup Jacket</b> <i>XARA Genoa (RED/WHT)</i>	__YM __YL __AS __AM __AL __AXL		1	\$95		\$
<b>Warmup Pants</b> <i>XARA Genoa (BLK/WHT)</i>	__YM __YL __AS __AM __AL __AXL		1	\$55		\$
<b>Backpack</b> <i>XARA Backpack (BLK/WHT) with Storm Logo and Player #</i>			1	\$65		\$
<b>White Jersey</b> <i>XARA Jersey (WHT)</i>	__YM __YL __AS __AM __AL __AXL		1	\$50		\$
<b>White Socks</b> <i>XARA Socks</i>	_____ S (Youth 10-3) _____ M (Youth 4-9/Ladies 3-8/Mens 4-9) _____ L (Ladies 9-12/Mens 10-13) _____ XL (13+)	Unisex	1	\$20		\$
<b>Competitive Player Package B Total:</b>						\$

**PAYMENT INFORMATION**

PLEASE MAKE ALL CHECKS PAYABLE TO : <b>STORM FC</b> Check #: _____ Payment Date: _____ Pay by ACH (Bank Draft): _____ YES Pay by Credit Card, Debit Card, Pre-Paid Card: _____ YES ** ** To pay by Credit Card, Debit Card, Pre-Paid Card or ACH Bank Draft, you must have a signed Auto Draft Form with your order or a payment method on file.	<b>ORDER TOTAL</b>	\$
	<b>Payment Months</b>	
	Fall (1, 2, 3 or 4) Spring (1, 2 or 3)	
<b>FORM INCLUDED</b> <input type="checkbox"/>	<b>Date to Start Payments</b>	

<b>Final Jersey Number Staff Approved</b>	<b>#</b> _____
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**Complete, Scan & Email to your Team Manager.**

<b>Player Name:</b>	<b>STORM FC</b> <b>COMPETITIVE</b> <b>KEEPER ORDER FORM</b> <i>Uniforms . Winter Wear . Gear</i>	 <small>dyworth pell ny a des warbarth warbarth ny a wra sawgy</small>
<b>Parent Name</b>		
<b>Street Address:</b>		
<b>City &amp; Zip:</b>		
<b>Phone:</b>	<b>Team Name:</b>	
<b>Email:</b>	<b>Coaches Name:</b>	

**Returning Player - \$15 Practice Tee**

ITEM	Sizes	M/W	QTY	\$	QTY	TOTAL
Practice Tee	Dri Fit Training Tee	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$15	\$

**KEEPER Package A: \$260 (Individual Retail Cost: \$305)**

ITEM	Sizes	Mens Womens	QTY in Packet	Extra/Reorder		TOTAL
				\$	QTY	
Keeper Jersey	LongSI-Padded (YEL/BLK)	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$65	\$
Keeper Jersey	ShortSI-Brasilia (BLU)	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$45	\$
JB OCT Jersey	XARA Tranmere (ORG)	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$45	\$
Keeper Shorts	Padded Shorts (BLK)	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$40	\$
Keeper Pants	Padded Pants (BLK)	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$55	\$
Practice Tee	Dri Fit Training Tee	__YM __YL __AS __AM __AL __AXL	Unisex	1	\$35	\$
Game Socks	Storm Logo Socks	____ S (Youth 10-3) ____ M (Youth 4-9/Ladies 3-8/Mens 4-9) ____ L (Ladies 9-12/Mens 10-13) ____ XL (13+)	Unisex	1	\$20	\$
<b>Competitive Keeper Package A Total:</b>						<b>\$</b>

**KEEPER OPTIONAL ITEMS**

ITEM	Sizes	Mens Womens	QTY in Packet	Extra/Reorder		TOTAL
				\$	QTY	
Warmup Jacket	XARA Genoa (RED/WHT)	__YM __YL __AS __AM		\$95		\$
Warmup Pants	XARA Genoa (BLK/WHT)	__YM __YL __AS __AM		\$55		\$
Home Jersey	XARA Club Jersey (BLK)	__YS __YM __YL __AS __AM		\$65		\$
Away Jersey	XARA Club Jersey (RED)	__YS __YM __YL __AS __AM		\$65		\$
Backpack	XARA Backpack (BLK/WHT) with Storm Logo and Player #	NA		\$65		\$
<b>Competitive Keeper Optional Items Total:</b>						<b>\$</b>

**PAYMENT INFORMATION**

PLEASE MAKE ALL CHECKS PAYABLE TO : <b>STORM FC</b>		<b>ORDER TOTAL</b>	<b>\$</b>
Check #: _____	Payment Date: _____	<b>Payment Months</b>	
Pay by ACH (Bank Draft): _____ YES		Fall (1, 2, 3 or 4)	
Pay by Credit Card, Debit Card, Pre-Paid Card: _____ YES *		Spring (1, 2 or 3)	
* To pay by Credit Card, Debit Card, Pre-Paid Card or ACH Bank Draft, you must have a signed Auto Draft Form with your order or a payment method on file.		<b>Date to Start Payments</b>	
FORM INCLUDED <input type="checkbox"/>			

**JERSEY NUMBER # 1 for KEEPERS**

Email a copy of your order form and this authorization to Jamie Penna, Office Manager OfficeStormFC@gmail.com or Text/Call 469-774-0829



Team Name: \_\_\_\_\_

Player Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Phone \_\_\_\_\_

Email: \_\_\_\_\_

ACH/eCheck . Credit Card . Debit Card

**Auto Draft Authorization Form**

Deposit Draft Amount \$ \_\_\_\_\_ Draft Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Dues Monthly \$ \_\_\_\_\_ Auto-Draft (1st-17th ) Start Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Draft End Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Draft For: \_\_\_\_\_

Draft Amount \$ \_\_\_\_\_ Auto-Draft (1st-17th ) Start Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Draft End Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Draft For: \_\_\_\_\_

Draft Amount \$ \_\_\_\_\_ Auto-Draft (1st-17th ) Start Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Draft End Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Draft For: \_\_\_\_\_

Draft Amount \$ \_\_\_\_\_ Auto-Draft (1st-17th ) Start Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Draft End Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Draft For: \_\_\_\_\_

Draft Amount \$ \_\_\_\_\_ Auto-Draft (1st-17th ) Start Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Draft End Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**CHECKING ACCOUNT**

Name on Checking Account: \_\_\_\_\_

Account Street Address: \_\_\_\_\_ City, State & Zip Co \_\_\_\_\_

Bank Name: \_\_\_\_\_ Bank City: \_\_\_\_\_

Banking Routing Transit/ABA Number (9 digits) \_\_\_\_ \_ \_\_\_\_ \_ \_\_\_\_ \_ \_\_\_\_ \_

Bank Account Number \_\_\_\_\_

**CREDIT CARDS . DEBIT CARDS . PRE-PAID CARDS**

Card Holder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Cod \_\_\_\_\_

Card Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

***There is a \$35 fee added to your account for each draft returned for insufficient funds***

*If a scheduled date-of-the-month auto-draft occurs on a weekend or bank holiday, the draft will be processed the next business banking day.*