

Customer Name: _____


Phone # _____

Email questions to: vikingpride@bvhs.org

Please return completed order form and check to:

Bishop Verot High School
ATTN: Gina Lombardo / Viking Pride
5598 Sunrise Drive
Fort Myers, FL 33919



	Price	Size	Qty	Total Due	Paid
Simple BV	22.00	S, M, L, XL			CASH
Fancy BV	35.00				
Verot Mom	22.00				
Bishop Verot Viking	30.00				CHECK #
 Verot	30.00				

Person taking the order: _____

Today's date _____