Friday, April 29
Freeman High School
T-Shirt Order Form

Contact Information

School: ______________________________ Teacher: ________________________________

Directions

<u>Please write the names of all teachers, aides, chaperones and student buddies who will attend the event. We are asking teachers, aides, chaperones and student buddies to wear a T-shirt representing their respective schools.</u> The age & gender is to be completed for Student Buddies only.
Fax this form to 346-9633 or email to tandes@specialolympicsva.org by April 2.

Name	Teacher	Aide	Chaperone	Student Buddy	Age	Gender