



# Custom Order Form for Racers

Customer Name: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

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

Contact Name: \_\_\_\_\_

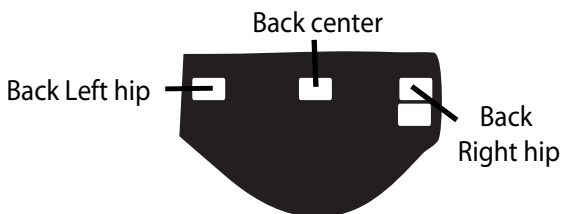
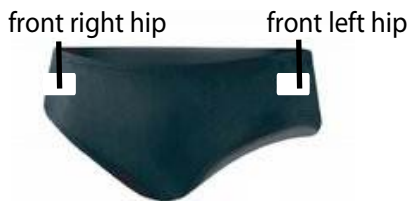
Fax #: (    ) \_\_\_\_\_

Complete & Fax to  
 1-800-846-7052  
 or mail to  
 2012 West College,  
 Normal, IL 61761

Sales Order #: \_\_\_\_\_

Place your logo in the blank area below:

## Printable Spaces



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

Font Name: \_\_\_\_\_

Ink Colors: \_\_\_\_\_

Suit Color: \_\_\_\_\_

Product #: \_\_\_\_\_

Art Dimensions:

FRONT: Height at Highest Point: \_\_\_\_\_ Width at Highest Point: \_\_\_\_\_

REAR: Height at Highest Point: \_\_\_\_\_ Width at Highest Point: \_\_\_\_\_