

# DHS XC Order Form

			QTY	TOTAL
DHS CC Window Decal			_____	_____
DHS CC Running Gloves	S	L	_____	_____
TOTAL				_____

Orders Due to Coach Timpa by November 1<sup>st</sup>, 2019

Make Checks to Dakota High School

Name\_\_\_\_\_

Check Number\_\_\_\_\_

