



Name _____
Address _____
City, State Zip _____
email: _____
Phone: _____

_____ Small @ \$12.00	_____
_____ Medium @ \$12.00	_____
_____ Large @ \$12.00	_____
_____ X-Large @ \$12.00	_____
_____ 2X @ \$12.00	_____
_____ 3X @ \$12.00	_____

SUB-TOTAL _____

POSTAGE \$3.00 ea. _____

TOTAL _____

Mail Check or Money Order to: Freedom Intergroup
c/o Barbara Lamanna
4640 Mile Stretch Dr.
Holiday, FL 34690