UNITED STATES SOCCER FEDERATION Academy Showcase DVD Order Form



Event Name:_	 	
Today's Date:	 <u>-</u>	

Today's Date	:				BM	ENT A TM
DVD ORDER						
Game Number	Quantity		Standard Definition	AVCHD Blu-ray High Definition	Total	
		x	\$10	\$15	= _	
		x	\$10	\$15	= _	
		x	\$10	\$15	= _	
			Pro	ocessing and Handling	=	\$5
				Total	= _	
On-site orders requ						
Check No.		is enclosed		Make checks payable to U	J.S. Soccer	
Credit Card	Туре:		Number:			
	Exp	iration date:				
SHIPPING IN	FORMATION					
		We will sh	nip to the address liste	ed below.		
Name:						
Address:				Apt	./Suite #: _	
No P.O. Boxes City:		State:			Zip Code:_	
Telephone:						
E-mail:						

Please mail completed order form, along with full payment to: U.S. Soccer Federation c/o Academy DVD Orders~1801 South Prairie Ave.~Chicago, IL 60616 OR

Fax to 312-808-1301 www.ussoccer.com