



Monroe Premier F.C. Uniform Replacement Program

Player Name: _____

Contact or Parent: _____

Contact or Parent Address: _____

Coaches Name: _____

Players Jersey Number: _____

Jersey Top (Circle or input size \$20.00 per top)

Navy YS YM YL AS AM AL

Size ____ Quantity ____

Yellow: YS YM YL AS AM AL

Size ____ Quantity ____

Shorts (Circle or input size \$15.00 per short)

Navy: YS YM YL AS AM AL

Size ____ Quantity ____

Socks (Circle or input size \$10.00 per pair)

Navy: YS YM YL AS AM AL

Size ____ Quantity ____

Total Cost: _____ (please make checks payable to Monroe Soccer Association and mail form and check to: PO Box 24, Monroe OH 45050)

Additionally once this is completed please email the form to

uniforms@monroepremierfc.org