

## **AHS Lacrosse Custom Glove Order**

Player Name: \_\_\_\_\_

### **AHS Custom Gloves**

**\$100**

(to be delivered mid-Dec – choice of sizes: 12, 13, or 14 - most will wear 13)

Mail to: AHS Lacrosse  
3571 Far West Blvd. #190  
Austin, TX 78731

Ck # \_\_\_\_\_  
payable to: AHS Men's Lacrosse

Please note: “Glove Order” on memo line