

COLLEGIATE HOUSE

SCHOOL UNIFORMS



970 Fellsway, Medford, MA 02155 781-219-4952 www.collegiatehouse.com

Saint Joseph School Wakefield

BOYS REQUIRED K through 4

2021

QTY	DESCRIPTION	SIZES available	Sizes	PRICE
	Maroon Polo Shirt Short Sleeve w/Embroidery of School Name	Youth Sz - YXS, YS, YM, YL, YXL Adult Sz. - AS, AM, AL, AXL		\$23.99 \$26.99
	Maroon Polo Shirt Long Sleeve w/Embroidery of School Name	Youth Sz - YXS, YS, YM, YL, YXL Adult Sz. - AS, AM, AL, AXL		\$24.99 \$28.99
	Black Boys Pants w/Reinforced Knees & Adjustable Waistband	Sz.5 - 16 Reg. & Slim Husky sz. 26 - 36		\$24.99 \$27.99
	Maroon V-Neck Cardigan w/Pockets w/Embroidery of School Name	YXS, YS, YM, YL, YXL AS, AM, AL, AXL		\$39.99 \$45.99
	Black Shorts w/Adjustable Waistband	Sz.5 - 16 Reg. & Slim Husky sz. 26 - 36		\$22.99 \$24.99
	Maroon Full Zip Charles River Apparel Fleece w/Embroidery of school name	Sz YXS - YXL Sz AS - AXL		\$41.99 \$46.99
	Maroon Nylon Hooded Jacket w/Embroidery of school name	Sz YXS - YXL Sz AS - AXL		\$47.99 \$59.99
	Black Cotton Crew Socks *(3 for \$15.00)	Sz.7-8.5, 8-9.5, 9-11		\$5.99
	Black Leather Belt	Sz. 22 - 36		\$11.99
**Youth size scale: YXS=3/4, YXS=5/6, YS=7/8, YM=10/12, YL=14/16, YXL=18/20				
Please make check payable to COLLEGIATE HOUSE			DEPOSIT PAID	

NONREFUNDABLE DEPOSIT OF \$20.00 IS REQUIRED WITH EACH ORDER, WITH THE BALANCE TO BE PAID AT THE TIME OF DELIVERY. DEPOSIT OF 25% OF TOTAL ORDER IS REQUIRED IF TOTAL ORDER EXCEEDS \$100.00.

Mail orders: Please include: \$10.00 dollars for shipping & handling.

Checks are acceptable for deposits only but not at time of pick-up. Prices subject to change without notice.

RETURNS AND EXCHANGES ALLOWED WITHIN 4 WEEKS OF DATE OF PURCHASE.

No cancellations, returns or exchanges allowed on special orders or embroidered items. If you will not be present when your child is being fitted for their uniform, please indicate next to the appropriate items above the quantities desired and have them bring this paper when ordering.

Orders MUST be placed by June 15th to ensure delivery in time for the opening of school.

Name of Student _____ Grade Entering _____

(please print)

Address _____ Phone _____

(No P.O.Boxes)

City, State, Zip _____

MEASUREMENTS (DONE BY COLLEGIATE HOUSE REPRESENTATIVE)

CHEST WAIST LENGTH FROM WAIST TO BOTTOM OF ANKLE

