



CSHA Trail Trials

Mask Order



Proceeds to help support CSHA Trail Trial Program

Name _____

Phone _____

Email _____

\$10 EACH

Payment Methods:
Check Payable to: CSHA
Cash

Styles ~ made with double layer polyester and not for medical use

#1 6 1/2" x 5 1/2" Large Face Mask w/o Nose Bridge

#2 6" x 5" Medium Face Mask w/o Nose Bridge

#3 6" x 4" Child Face Mask w/o Nose Bridge

#4 8" x 5 1/2" Large Face Mask with Nose Bridge & Black Trim & Ear Loops

#5 6" x 5" Medium Face Mask With Nose Bridge & Black Trim & Ear Loops

#6 6" x 4" Small Face Mask With Nose Bridge & Black Trim & Ear Loops



Style

Color/Qty

		Brown	Red	White	Orange	Yellow	Green	Blue	Purple		
#1	<input type="checkbox"/>	#2	<input type="checkbox"/>	#3	<input type="checkbox"/>	#4	<input type="checkbox"/>	#5	<input type="checkbox"/>	#6	<input type="checkbox"/>
#1	<input type="checkbox"/>	#2	<input type="checkbox"/>	#3	<input type="checkbox"/>	#4	<input type="checkbox"/>	#5	<input type="checkbox"/>	#6	<input type="checkbox"/>
#1	<input type="checkbox"/>	#2	<input type="checkbox"/>	#3	<input type="checkbox"/>	#4	<input type="checkbox"/>	#5	<input type="checkbox"/>	#6	<input type="checkbox"/>
#1	<input type="checkbox"/>	#2	<input type="checkbox"/>	#3	<input type="checkbox"/>	#4	<input type="checkbox"/>	#5	<input type="checkbox"/>	#6	<input type="checkbox"/>
#1	<input type="checkbox"/>	#2	<input type="checkbox"/>	#3	<input type="checkbox"/>	#4	<input type="checkbox"/>	#5	<input type="checkbox"/>	#6	<input type="checkbox"/>
#1	<input type="checkbox"/>	#2	<input type="checkbox"/>	#3	<input type="checkbox"/>	#4	<input type="checkbox"/>	#5	<input type="checkbox"/>	#6	<input type="checkbox"/>

Return to Victor Pedroza by March 17

11156 Escondido

Turlock, CA 95380

text/call: 209-605-3905

email: pedrozav@charter.net

total cost _____

payment type _____