DECV Jumper Order Form

We are very excited to announce the opportunity for each student to place an order for a DECV Jumper. This is something our Student Voice Team and Leadership team has been working on this year. Please note, we must receive orders for at least 50 jumpers. If we receive an order for any less than this, the jumpers cannot go ahead.

Attached is the order form and size guide.

Cost: $45 each (incl. Postage and Handling)

Please return the attached order form to DECV by no later than Monday July 27th (start of second week in Term 3).

Forms can be returned via email to strotter@distance.vic.edu.au or by post using the following information:

Sally Trotter
315 Clarendon Street Thornbury, VIC 3071

RETURNS POLICY: No returns will be accepted by Payless Promotions unless a mistake on their behalf has been made in the printing process.

Regards

Sally Trotter
On behalf of The Student Voice and Leadership Team

For queries please contact Sally Trotter at DECV on 8480 0188 or email strotter@distance.vic.edu.au
DECV Jumper Size Guide

FL09/FL09K PASSION

Close Front Fleecy Hoodie

Fabric: Cotton Blend
320gsm - 65% Polyester, 35% Cotton

Description: Contrast colour inside hood lining and draw strings. Raglan sleeve style. Close front. Two handwarmer pockets. A top design for work & outdoor activities.

FL09 Adult’s Close Front Contrast Fleece Hoodie

<table>
<thead>
<tr>
<th>SIZE</th>
<th>XS</th>
<th>S</th>
<th>M</th>
<th>L</th>
<th>XL</th>
<th>2XL</th>
<th>3XL</th>
<th>5XL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ladies Sizes</td>
<td>12</td>
<td>14</td>
<td>16</td>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Half Chest</td>
<td>55.5</td>
<td>58</td>
<td>60.5</td>
<td>63</td>
<td>65.5</td>
<td>68</td>
<td>70.5</td>
<td>?</td>
</tr>
<tr>
<td>Body Length</td>
<td>66</td>
<td>68</td>
<td>70</td>
<td>72</td>
<td>74</td>
<td>76</td>
<td>78</td>
<td>?</td>
</tr>
</tbody>
</table>

Weight & size measurements are for guidance only

FL09K Kids’ Close Front Contrast Fleece Hoodie

<table>
<thead>
<tr>
<th>SIZE</th>
<th>6K</th>
<th>8K</th>
<th>10K</th>
<th>12K</th>
<th>14K</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ladies Sizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Half Chest</td>
<td>42</td>
<td>45</td>
<td>47.5</td>
<td>50</td>
<td>52.5</td>
</tr>
<tr>
<td>Body Length</td>
<td>52</td>
<td>56</td>
<td>62</td>
<td>64</td>
<td>66</td>
</tr>
</tbody>
</table>

(No Draw-Cord on future production)
DECV Jumper Order Form (page 1)

Name: ...........................................  DECV Number: .........................................  YEAR LEVEL: ..................................

Address: ........................................................................................................................................................................

.............................................................................................................................................................................

ADULT SIZE (please circle your chosen size)  KIDS SIZE (please circle your chosen size)

XS  Small  Medium  Large  XL  XXL  3XL  5XL  6K  10K  12K  14K

(Please find size guide attached)

NICKNAME

Nickname: ...........................................

Please print clearly (max. 10 characters. The longer the nickname, the smaller the font. Numbers and symbols are allowed)

PAYMENT OPTIONS  Jumpers are $45 each. This includes postage to the address you have listed above.

☐ Credit Card  ☐ Direct Deposit  ☐ Money Order (made out to DECV)

Please complete payment details on page 4.
Payment Details (Direct Deposit or Credit Card)

For Direct Deposit please make payment to the DECV using the banking details provided below:

Bank   CBA
A/C name Distance Education Centre Victoria
BSB  063 100
A/C NO  10005861

REF: Your DECV Student Number …………………

Total payment $: __________

Name / s………………………………………………………………………………

DECV No………………

Signature……………………………… Date   /   /15

OR

For Credit Card payment please complete this section:

Please debit my:  
  [ ] Visa  [ ] MasterCard

Credit Card Number

Expiry Date: ______________  Amount $__________________

Cardholder’s name: __________________________________________

Signature: ______________________________  Date:   /   /15

All order forms MUST BE COMPLETED AND POSTED, EMAILED OR FAXED
to reach DECV by Monday July 27th to

Attention of: Sally Trotter

315 Clarendon Street, Thornbury 3071
OR
strotter@distance.vic.edu.au
OR
FAX (03) 9416 8371