This form serves as your CAP & GOWN reservation form . . . please be accurate with your HEIGHT and WEIGHT.

Jostens®

School

First Name

Middle Name

Last Name

Cell Phone ___ – ___ – ____

HEIGHT Feet | Inches **WEIGHT**

** Please be accurate with your height and weight (I.E. 5 Ft. 6 In. 175 Lbs.)*

THIS FORM WILL RESERVE YOUR CAP AND GOWN FOR GRADUATION.

IF THIS FORM WAS NOT TURNED IN DURING THE SENIOR MEETING ON WEDNESDAY, DECEMBER 13th, PLEASE FILL OUT AND RETURN TO DEBBIE PIERCE IN COUNSELING OFFICE ASAP.

PLEASE FILL OUT ALL. FILL IN HEIGHT AND WEIGHT AS ACCURATELY AS POSSIBLE.