

MIT COOP Regalia Purchase Order Form

Mail to: MIT Cap & Gowns 325 Main Street, Cambridge MA 02142

Phone: 617.499.3220 email: mitregalia@thecoop.com

You can also Fax to: 617-499-2038

Personal Information	
Full name:	_____
Home address:	_____ _____
Shipping Address: (no PO boxes, please)	_____ _____
Phone:	_____
email address:	_____
Student ID#: (if applicable)	_____
Coop number:	_____
Order Information	
Suit / Chest or Dress Size* _____	Height _____
(measure around your chest under your arms)	Cap Size _____
Weight _____	*(measure circumference of your head 1' above your ears)
Ceremony Date: _____	Graduation Year: _____
Gown Selection	
Doctor's Gown	Qty: _____ \$741.00
Doctor's Hood	Qty: _____ \$177.00
Doctor's Tam	Qty: _____ \$ 91.00
Master's Gown	Qty: _____ \$273.00
Master's Cap	Qty: _____ \$ 43.00
Bachelor's Gown	Qty: _____ \$242.00
Bachelor's Cap	Qty: _____ \$ 43.00
Country Stole (please specify)	Qty: _____ \$ 44.98
Shipping Handling Fee	Select one: <input type="checkbox"/> \$15.95 within US <input type="checkbox"/> \$150.00 outside US (UPS Air)
Payment Information	
Select Payment	Visa <input type="radio"/> MC <input type="radio"/> Amex <input type="radio"/> Discover <input type="radio"/>
Credit Card #	_____
Expiration Date:	_____ CCV # _____ Billing Zip Code _____