



Holy Trinity Catholic High School



128 Evergreen Hill Road
Simcoe, ON N3Y 4K1
519-429-3600
Fax 519-429-3603

Wednesday, Oct. 7th 2020

Re: HT Health Care Spirit Wear

Dear Parents/ Guardians:

As we are in a quadmester schedule this year, I have decided to order scrubs on 2 occasions. Once this quadmester and once during semester two. **You do not have to have a student taking the class to order the scrubs.** The website that we order the scrubs from is called **scrubscanada.ca.** Please take a few moments to browse this website to choose which scrubs you would like to order for your son/daughter for the health care class or for spirit wear days. **Ordering these scrubs is OPTIONAL. We will most likely NOT be going to Norview but they can wear the scrubs on Friday's for Spirit Wear. So this purchase is completely up to you.**

The top that most students order is called the 1102 Maevn Blossom – Y-neck top or the 1202 - 3 Pocket Fashion V-Neck Top in the wine/silver colour. The bottoms that most students order is called the 9202 Maevn Blossom - Multi Pocket Utility Cargo Pant also in wine/silver. You are not obligated to purchase these items, but I have found that they are comfortable and wash nicely. (Tax, and screen-printing logo come to around \$70). **Please pay close attention to the sizing chart on the website for whatever brand you decide to purchase as there will be no refunds for scrubs once they are ordered and screen printed with the health care logo. Payment must be made prior to ordering.**

Please talk to your son/daughter about their choices below and fill out the required information.

Please add tax to your total for each item you are choosing. Please e-mail me if you have any questions about a total. (mbouw@bhncdsb.ca) **Please send exact cash or write a cheque.** School cash on -line is not available for this order. **DO NOT ORDER from the site-** as I get free shipping when I place a bulk order. I will place the order when I have all the order forms handed in.

Top Choice _____ Size _____ Colour _____

Bottom Choice _____ Size _____ Colour _____

Student Name (Print) Parent Signature

Parent Contact Info: _____
(print name and cell number please)

*** Please **do not** order them from the website, only use the website to fill in this form.

Return this form to Mrs. Bouw by Wednesday, Oct. 14th, 2020.