



UMASS STORE  
 1 CAMPUS CENTER WAY  
 AMHERST, MA 01003  
 PH: 413-545-2619  
 FX: 413-545-4396  
 EMAIL: umassstore@umass.edu

# UMASS Authentic Academic Regalia Order Form

## Our custom tailored Deluxe Doctoral outfit features...

- ◆ premium fabric in the authentic UMass Amherst color
- ◆ full, deluxe fluting over the shoulders
- ◆ broad rich black velvet panels & doctoral bars
- ◆ rich white piping around the velvet panels and bars
- ◆ distinctive front pleated panels
- ◆ zipper closure
- ◆ pocket slit
- ◆ deluxe braided cord & button
- ◆ University of Massachusetts Amherst doctoral hood
- ◆ black velvet 8-corner tam with gold metallic tassel
- ◆ hand crafted and custom tailored



Please check those items you will be ordering.

✓	ITEM DESCRIPTION	PRICE	TOTAL
	DELUXE (Custom Tailored) DOCTOR <b>OUTFIT</b>	\$858.00	\$
	DELUXE (Custom Tailored) DOCTOR <b>GOWN</b>	\$585.00	\$
	DELUXE (Custom) DOCTOR <b>HOOD only</b>	\$149.00	\$
	DELUXE TAM w/ GOLD METALLIC TASSEL	\$144.00	\$
	ECONO TAM with GOLD SILK TASSEL	\$39.50	\$
	STANDARD DOCTOR <b>GOWN</b>	\$350.00	\$
	DELUXE (Traditional Black) MASTER'S <b>CAP &amp; GOWN</b>	\$159.00	\$
	DELUXE MASTER'S <b>HOOD</b>	\$86.00	\$
	MASTER'S MORTARBOARD <b>CAP &amp; TASSEL</b>	\$28.00	\$
	GARMENT BAG (Vinyl - Gown Length)	\$11.95	\$
	SHIPPING/PACKAGING (UPS Ground)	\$18.00	\$
	HOLD FOR PICK-UP	N/C	
	<b>TOTAL</b>	\$	

TYPE PAYMENT ENCLOSED:

CHECK



CREDIT CARD

CARD #: \_\_\_\_\_

BILLING STATEMENT ZIP CODE: \_\_\_\_\_ CSC: \_\_\_\_\_ (CARD SECURITY CODE)

EXP DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ NAME ON CARD: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

PLEASE PRINT ALL INFORMATION

NAME \_\_\_\_\_

\_\_\_\_\_ FT \_\_\_\_\_ IN \_\_\_\_\_ LBS \_\_\_\_\_ IN  
**HEIGHT WEIGHT CHEST**

\_\_\_\_\_ SHORT - REG - LONG \_\_\_\_\_ IN  
**JACKET SIZE** ↑CIRCLE ONE ↑ **HEAD CIRCUM.**

\_\_\_\_\_ IN \_\_\_\_\_ IN  
**SHIRT/BOLOUSE SLEEVE LENGTH WRIST CIRCUM.**

\_\_\_\_\_ (i.e., M.Ed., M.A., Ph.D., J.D.)  
**DEGREE EARNED**

Customer Pick-Up  Ship to Following Address

STREET ADDRESS \_\_\_\_\_

CITY / TOWN STATE ZIP

( ) \_\_\_\_\_ - \_\_\_\_\_  
**DAYTIME PHONE E-MAIL**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**NEED BY FOR USE ON**