



HOLY NAME OF MARY SCHOOL

90 S. Grove Street
Valley Stream, NY 11580
(516) 825-4009

Father David Regan, *Pastor*

Mrs. Pamela Sanders, *Principal*

Dear 8th Grade Students and Families,

To ensure graduation gowns fit properly, students' height and weight need to be submitted so that the measurements can be sent to the manufacturer. **Please fill out the following information as accurately as possible, and return to your 8th grade homeroom teacher by _____, _____.**

Fitting Measurements for Graduation Gown:

Student Name: _____

HEIGHT: _____ **feet** _____ **inches**

* MEASURE HEIGHT WHILE WEARING SHOES. (GIRLS, PLEASE ADD 2-3 INCHES TO YOUR HEIGHT TO ACCOUNT FOR HEELS, IF APPLICABLE).

WEIGHT: _____ **lbs.**

Parent/Guardian Name:

Parent/Guardian Signature:

Date: _____ / _____ / _____

