



MOUNT VERNON
ATHLETIC CLUB

Tennis Staff

Racquet Stringing Service Order

Name: _____ Phone: _____ Time/Date: _____

Racquet: _____ Tension: _____ Staff Initial: _____

Babolat Strings

___ (\$33) Synthetic Gut

___ (\$35) Pro Hurricane

___ (\$38) Pro Hurricane Tour

___ (\$35) Addiction

___ (\$40) Excel

___ (\$68) Natural Gut

___ (\$36) Revenge

Prince String:

___ (\$33) Synthetic Gut Lightning XX

___ (\$38) Pro Blend

Luxilon Strings

___ (\$48) 125

___ **(\$18) Customer's String**

___ **(\$10) Bumper Guard Replacement**

Signature: _____ Charge Account _____ Total \$ _____