

MEDICAL STAFF ASSOCIATION

LAB COAT ORDER FORM

****Please scan and email to MSA@hhsc.ca****

FREE PERSONALLY MONOGRAMED LAB COAT

(one free coat per member)

Extra coats can be ordered at cost - \$40

MSA dues must be current

QUANTITY: _____

Please refer to Sizing Chart before ordering, MOBB Brand:

<https://www.mobmedical.com/full-length-unisex-snap-lab-coat.html>

SIZE: SMALL - Small ; X-Small ; XX-Small ; XXX-Small

MEDIUM -

LARGE - Large ; X-Large ; 2XL ; 3XL ; 4XL

MONOGRAM (PRINT CLEARLY):

Name _____

Location of name on pocket ~ LEFT side ; RIGHT side

Department to be printed on lab coat: _____

Hospital: Hamilton Health Sciences ; Juravinski Hospital & Cancer Centre ;

McMaster University Medical Centre ; McMaster Children's Hospital ;

St. Peter's Hospital ; WLMH

CONTACT INFORMATION FOR DELIVERY

Phone _____

EMAIL _____

Mailing Address for delivery of lab coat ~ Site/Room #: _____

For MSA Office Use Only

Date Ordered _____

Date Rec'd _____

Date Shipped/Picked Up _____

**Please Direct all inquiries to the MSA Office at
msa@HHSC.CA / 905-527-4322 EXT 46770**