Name _____

Address _____

City/State/Zip _____

Cell _____ Home _____

Work Phone _____

Email _____

Web Site _____

Date of Deposit: _____

Design Rec'd: _____

Date Measured: _____

INVOICE NO: _____

Lady Eagle™ SAFETYWEAR

984 Industry Drive Tukwila, WA 98188
(206) 767-9500 Fax (206) 447-0824
info@ladyeagle.com www.ladyeagle.com

ISAIAH 40:31

SHIP : _____

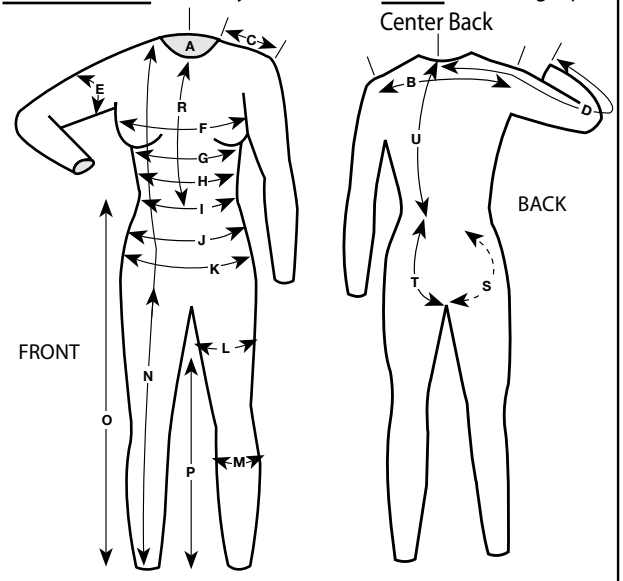
Date:

Sewer:

Take **ALL** measurements.

DO NOT ADD NUMBERS TOGETHER.

PLEASE DO NOT measure yourself. Use a **CLOTH** measuring tape.



When measuring, **GO AROUND** the whole body.

If in doubt when measuring, **PLEASE CALL** us for help:
Phone: (206) 447-9860 • Fax (206) 447-0824

Height_____ Weight_____ Age_____

			Shop Only	
			Finish At	Finished
	A. _____	Neck size		
	B. _____	Across shoulders (back)		
	C. _____	Sleeve seam to collar		
	D1. _____	Arm bent (center of collar to wrist)		
	D2. _____	Arm (shoulder to wrist)		
	E. _____	Bicep (flexed)		
	F. _____	Chest circumference at fullest		
	G. _____	Midway between chest & waist (base of ribs)		
	H. _____	Stomach measurement at fullest		
	I. _____	Waist circumference		
	K. _____	Hip circumference at fullest		
	L. _____	Thigh		
	M. _____	Calf circumference at fullest		
	N. _____	Shoulder seam to ankle bone		
	O. _____	Outside seam (waist to bottom of ankle bone)		
	P. _____	Crotch seam to ankle bone (not pants length)		
	R. _____	"V" of neck to waist		
	S. _____	Waistline to crotch seam (front) — **Measure S + T**		
	T. _____	Waistline to crotch seam (back) _____		
	U. _____	Collar to waistline (back)		
	R-S-T_____	Combined (from front collar through legs to back waist)		
	U-T-S_____	Combined (from back collar through legs to front waist)		
	R-S-T-U_____	Combined (from front collar through legs to back collar)		

INVOICE NO: _____

ACCESSORY NEEDS (Color & Sizes where necessary)

UNDERWEAR ☐ Top ☐ Bottom ☐ CarbonX ☐ _____
☐ Bra ☐ Shorts ☐ CarbonX ☐ _____
☐ Tank w/Built-in Bra ☐ Tank ☐ CarbonX ☐ _____
☐ HEAD SOCK ☐ Single Eyeport ☐ Twin Eyeport
☐ CarbonX ☐ _____
☐ SOCKS ☐ Nomex ☐ CarbonX Size_____
☐ SHOES Style_____ Color_____ Size_____
☐ GLOVES Style_____ Color_____ Size_____
☐ RACEGEAR BAG_____ Color_____ Size_____
☐ NECK COLLAR_____ Color_____ Size_____
☐ HARNESS PADS_____ Color_____
☐ HELMET Model_____ Size_____
☐ SHIELDS Model_____ Color_____
☐ HELMET SKIRT_____ Color_____
☐ HELMET BAG_____ Color_____ Size_____

SPECIAL REQUESTS_____

Take **EXACT** measurements. **DO NOT** make adjustments.

Suit Options:

SFI Patch ☐ 3.2A/____ ☐ **PLUS** ☐ **Lite**

OUTER Layer ☐ Woven ☐ Sateen ☐ Knit ☐ _____
Lining ___CarbonX ___Honeycomb ___Knit
LAYERS ☐ 2 ☐ 3 ☐ 4 ☐ _____
MIDDLE Layer ___Knit ___Honeycomb ___CX Felt
QUILTING ☐ Pinstripe ☐ Box Quilt ☐ Custom
COLLAR ☐ Wrap Around ☐ Knit ☐ _____ ☐ Raceiver Pocket
EPAULETS ☐ 3-Point ☐ Standard ☐ HR Pro ☐ _____
SHOULDERS ☐ 180° ☐ 270° ☐ 360° ☐ Extended Shoulder
"D"RINGS ☐ Below Elbow ☐ **SFI** 3.3 Arm Restraint Patch
LEGS ☐ Bootleg w/inset cuff ☐ Hoof ☐ Sewn In socks ☐ Cuff Leg

I agree that all measurements and information given are accurate and wish my suit to be made to this design. 50% DEPOSIT REQUIRED WITH ORDER

Date_____ Signed_____ Dep. Amt_____ Next Race_____

Note - ***Delivery time may vary according to time of year.*** Lady Eagle Safetywear / DESIGN. FORM REV. 3/11 © Contingency Certificate Amt _____