

TRUE

Customer

Name: _____ Phone #: _____

Email: _____

Age: _____ Weight (est.): _____ Height (est.): _____

Shipping

Address (Street Name and #): _____

City: _____ Postal Code: _____

Country: _____

Measurements:

	Left Foot	Old Boot Left	Right Foot	Old Boot Right
Ball of Foot				
Heel				
Length				



Stiffness of Ankle: Soft / Medium / Stiff / Extra Stiff

Stiffness of Base: Soft / Medium / Stiff / Extra Stiff

Boot Height: Low / Standard / High

Strap Colour (1): _____ **Strap Colour (2):** _____ **Embroidery Colour - TRUE:** _____

Cover Colour: _____ **Boot Colour:** _____ **Stitching Colour:** _____

Emblem – Board/TRUE/Back/Leaf (7): _____

Other: