



SCULPTURE GARMENTS

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MADE TO MEASURE ORDER FORM

Please contact us to find out which measurements are required or for any other enquiries.

Surgeon/Clinic

Patient Name

Postal address

Courier delivery address

Phone

Email

Fax

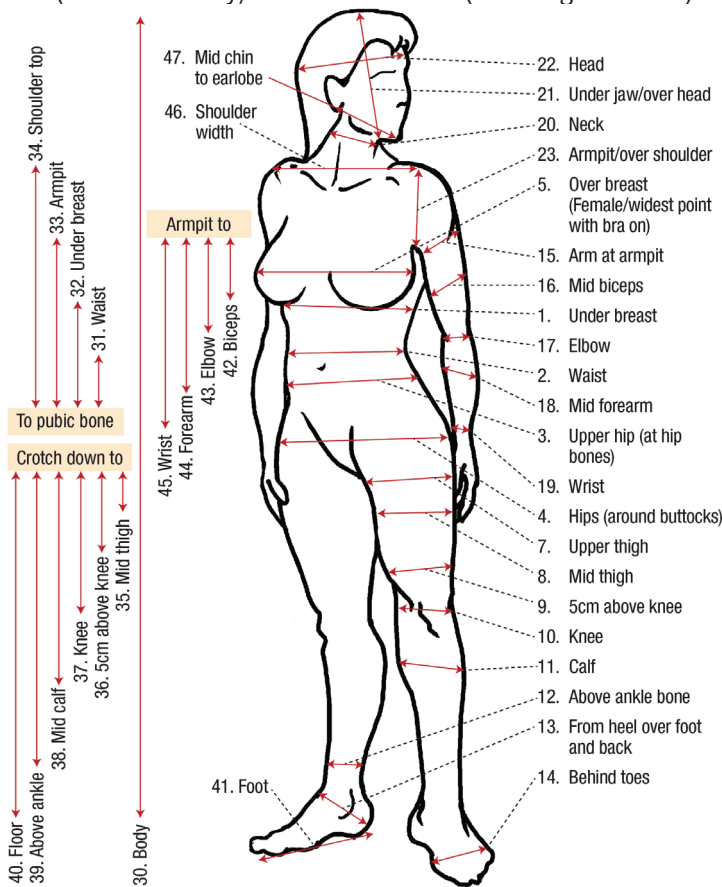
Style No./Description	Colour (Black or Natural)	Quantity	Delivery Date Required	Operation Date	Reference No.

Description of operation including areas of the body

Comments

HEIGHTS/LENGTHS (taken vertically)

CIRCUMFERENCES (taken right around)



MEASUREMENTS			cm <input type="checkbox"/>	inches <input type="checkbox"/>
No	CIRCUMFERENCES		VERTICAL HEIGHTS	
	Description	Measurement	No	Description Measurement
1	Under breast		30	Total body height
2	Waist		31	Waist to pubic bone
3	Upper hip (at hip bones)		32	Under breast to pubic bone
4	Hip (around buttocks)		33	Armpit to pubic bone
5	Over breast (women with normal bra on)		34	Shoulder top to pubic bone
6	Usual or projected bra cup size		35	Crotch to mid thigh
7	Upper thigh	LEFT RIGHT	36	Crotch to above knee
8	Mid thigh		37	Crotch to knee
9	Above Knee		38	Crotch to mid calf
10	Knee		39	Crotch to narrow part above ankle
11	Calf		40	Crotch to floor
12	Narrowest part above ankle		LENGTHS	
13	From heel point diagonally over bridge of foot		41	Foot
14	Behind toes		42	Armpit to mid biceps
15	Arm at armpit		43	Armpit to elbow
16	Mid biceps		44	Armpit to mid forearm
17	Elbow		45	Armpit to wrist
18	Mid forearm		46	Shoulder width
19	Wrist		47	Mid point chin to earlobe
20	Neck		OFFICE USE ONLY	
21	Under jaw up over head		Inv	
22	Head		Disp. date	
23	Armpit up over top of shoulder		Payment	
			Carrier	

CREDIT CARD PAYMENT VISA/MASTERCARD AMEX

Card # Exp. /

Name on Card CVV

A Credit Card transaction receipt will be sent if an email address is provided

INTERNET BANKING Use your name as reference

NZ: 12 3031 0044771 00 AUS: BSB 06 2000 Account 14782193