

# PURCHASE ORDER | SIGNATURE LADIES



**ORDER STEPS**  
SALES@ELITEXPRESSION.COM

- STEP 1 : PURCHASE ORDER FORM COMPLETED
  - MUSIC
  - SKATER'S PICTURE
  - INSPIRATION (PICTURE OR DRAWING)
- STEP 2 : FULL PAYMENT (ADMINISTRATION@MAISON DU PATIN.COM)
- STEP 3 : DESIGN & MEASUREMENTS
- STEP 4 & 5 : FITTING & DELIVERY

OPTION

DESIGN DETAILS

All options include fabric, fitting, hand beading, Swarovski crystal and headpiece

OPTION

DÉTAILS DE DESIGN

DÉCORATION

<input type="checkbox"/> 750\$	- Basic dress 500\$	Décoration 250\$
<input type="checkbox"/> 1000\$	- Basic dress 500\$	Décoration 500\$
<input type="checkbox"/> 1500\$ - 2000\$	- Design / Fabric research - Basic dress 500\$	Décoration 1000\$ - 1500\$
<input type="checkbox"/> 5000\$	- Design /Fashion design signature fabric - Basic dress 500\$	Décoration 4500\$

\*\*\* Fabric, fitting, hand decoration, crystals and headsets are included with all options.

- Step 1 | PURCHASE ORDER-

Send to [sales@elitexpression.com](mailto:sales@elitexpression.com)

SKATER NAME

PARENT NAME

BILLING ADDRESS

COACH NAME

CITY

FSC

POSTAL CODE / ZIP CODE

CATEGORY

PROVINCE / STATE

AGE

COUNTRY

E-MAIL

TELEPHONE

CELLPHONE



- Step 2 | PAYMENT

Send to [administration@maisondupatin.com](mailto:administration@maisondupatin.com)

PRICE  600\$  900\$  1150\$  1700\$  2300\$  5000\$  10000\$ and more

Visa  
 Mastercard  
 Interact transfert  
(password: signature)

CARD HOLDER :

SIGNATURE :

CARD # :

EXPIRY DATE :

SECURITY CODE

- Step 3 | DESIGN

DESCRIPTION :

COLORS :

FABRICS :

MUSIC TYPE :

- Step 3 | MEASURES

IMPERIAL MEASUREMENTS (INCH)

1- WAIST (AROUND) \_\_\_\_\_

8- BELLY BUTTON-KNEE \_\_\_\_\_

2- SHOULDER- CROTCH \_\_\_\_\_

9- BUST \_\_\_\_\_

3- SHOULDER-WRIST \_\_\_\_\_

10- HIPS (AROUND) \_\_\_\_\_

4- BICEPS (AROUND) \_\_\_\_\_

FRONT CLEAVAGE \_\_\_\_\_

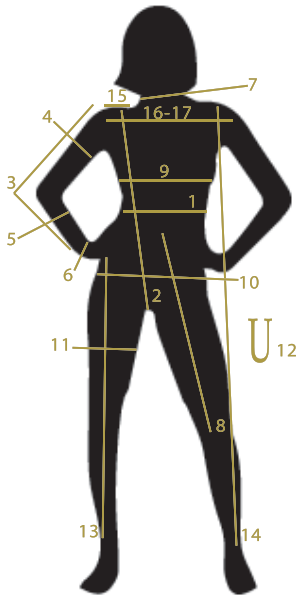
5- FOREARM (AROUND) \_\_\_\_\_

BACK CLEAVAGE \_\_\_\_\_

6- WRIST (AROUND) \_\_\_\_\_

GLOVES \_\_\_\_\_

7- NECK (AROUND) \_\_\_\_\_



- Step 4 | FITTING

FITTING DATE: \_\_\_\_\_

DELIVERY DATE: \_\_\_\_\_

- Step 5 | DELIVERY

PICK-UP AT THE STORE

DELIVERY

NAME

SAME AS BILLING ADDRESS

STREET

CITY

PROVINCE/STATE

COUNTRY

POSTAL CODE /ZIP CODE

