IC Full Name
Contact No.
Email
Group Name
Competition / Performance Name

DATE:



BODY MEASUREMENTS FORM (in cm)

Dancer's Name Measure -ments					
Height					
Bust / Chest					
Waist					
Hips					
Collar					
Shoulder Line					
Back Length					
Arm Hole					
Upper Arm					
Sleeve Length					
Wrist					
Girth					
Crotch					
Thigh					
Pants Length					
Skirt Length					
Ankle					