

## PERSONAL FIT FORM

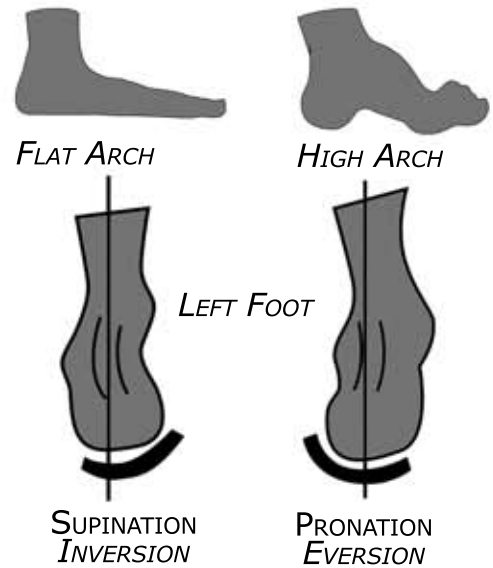
\_\_\_\_\_  
 LAST NAME FIRST NAME  
 \_\_\_\_\_  
 STREET OCCUPATION  
 \_\_\_\_\_  
 ZIP CODE CITY  
 \_\_\_\_\_  
 STATE AND/OR COUNTRY  
 \_\_\_\_\_  
 TEL FAX  
 \_\_\_\_\_  
 eMAIL SHOE SIZE

**BOOT TECH USE ONLY**

PURCHASE DATE \_\_\_\_\_  
 PICK UP DATE \_\_\_\_\_  
 AMOUNT PAID \_\_\_\_\_  
 INVOICE NUMBER \_\_\_\_\_  
 SALESPERSON \_\_\_\_\_

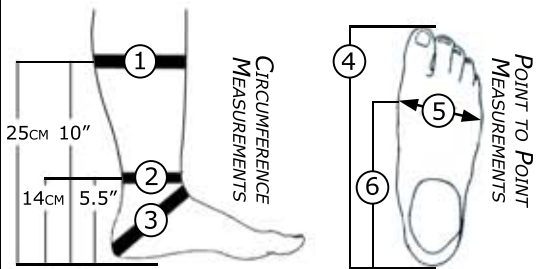
**BOOT TECH USE ONLY**

ARCH HEIGHT  NORMAL  HIGH ARCH  FLAT ARCH  
 HEEL STANCE  NORMAL  PRONATION  SUPINATION  
 ANKLE  NORMAL  LARGE MEDIAL  LARGE LATERAL  
 ANKLE DORSIFLEXION  TIGHT  FLEXIBLE DEGREE L: \_\_\_\_\_ R: \_\_\_\_\_  
 EXOSTOSIS  INSTEP BUMP  HALLUX VALGUS  TAILOR'S BUNION  
 PUMP BUMP  BUNION  MORTON'S FOOT  
 OTHER: \_\_\_\_\_  
 DIFFERENCE IN LEG LENGTH LEFT: \_\_\_\_\_ RIGHT: \_\_\_\_\_  
 FOOTBED  YES  NO  OK  REBUILD \_\_\_\_\_ TYPE



MODEL SELECTION: \_\_\_\_\_ SIZE: \_\_\_\_\_ LINER SIZE: \_\_\_\_\_ LINER TYPE: \_\_\_\_\_  
 OBSERVATIONS: \_\_\_\_\_

LEFT FOOT		RIGHT FOOT		BOOT OPTIONS
1. CALF _____ INCH/CM	1. CALF _____ INCH/CM	1. _____		
2. ANKLE _____ INCH/CM	2. ANKLE _____ INCH/CM	2. _____		
3. FOOT VOLUME _____ INCH/CM	3. FOOT VOLUME _____ INCH/CM	3. _____		
4. SIZE _____ <input type="checkbox"/> BRANNOCK <input type="checkbox"/> MONDO	4. SIZE _____ <input type="checkbox"/> BRANNOCK <input type="checkbox"/> MONDO	4. _____		
5. WIDTH _____ INCH/CM	5. WIDTH _____ INCH/CM	5. _____		
6. ARCH LENGTH <input type="checkbox"/> BRANNOCK <input type="checkbox"/> INCH/CM	6. ARCH LENGTH <input type="checkbox"/> BRANNOCK <input type="checkbox"/> INCH/CM			



NAME OF PARTNER: \_\_\_\_\_  
 MOD'S NEEDED BY: \_\_\_\_\_  
 METHOD OF PAYMENT: \_\_\_\_\_

