

RHINO LAMINATING CUSTOM ORDER FORM

Name:	Phone:
Email:	
Adress:	
Postcode:	State:



RHINO STORE

BRAND:

MODEL:

Deck



Bottom



SPECIFICATIONS

GLASSING

COLOUR: TINT/SPRAY

Length:

Deck:

Width:

Bottom:

Thickness:

Finish: /

Tail Shape:

Additional notes:

Fin Set-up: