P STMARK
UKRAINE

Desired receive by date:
_____

Name & group:_____

Shoe/boot style:_____

Colour:_____

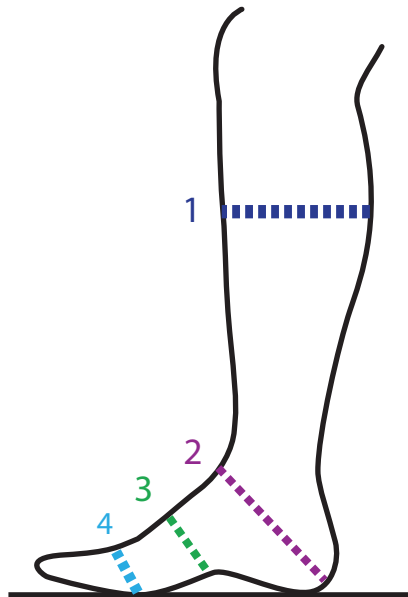Please circle: Snug / Room for growth

Specifics:_____

ALL MEASUREMENTS TO BE TAKEN IN CENTIMETERS
** measure leg while standing.
** measure length and width from your foot tracing only.
** when making a large order, it is best to have one person taking all measurements.
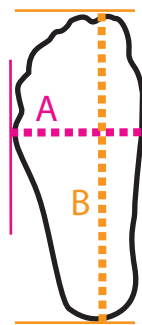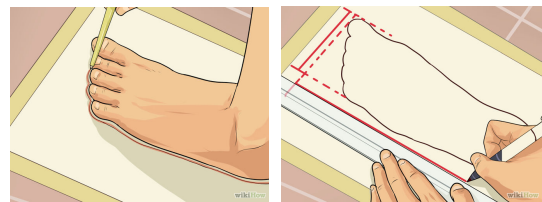
Leg Map

Age: _____

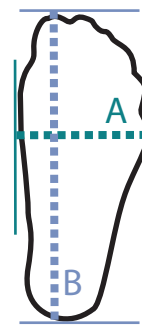1. Leg calf: _____cm

2. Heel: _____cm

3. Instep: _____cm

4. Joint: _____cm

Foot Map

Left   **Right**

Left:

1. Left A: _____cm

2. Left B: _____cm

Right:

3. Right A: _____cm

4. Right B: _____cm