

p. 1 of 2

Facility Name	Cı	ust. #	Date	
Billing Address				
City	St	tate	ZIP	
Shipping Address (if different)				
Phone # ()	Fax # ()		Email	
Payment Type		□ Discov	ver Card #	
☐ Check Enclosed	Cardholder's Signature		Exp. Date	
Ordered by (your name)			Note: Personalized and Perfect Fit Aprons	
Ordered for (user & dept.)			and Thyroid Shields are not returnable.	
Please use a separate form for each apron ordered. (Vest and Kilt are considered one.)			Thyroid Shield	
Item #	Apron #		☐ Unattached #	
	Vest # Kilt #		☐ Attached (no item number needed)	
Product	Style		Style	
	☐ Ultralight Lead-Free☐ Lead-Free☐ Usead-Free☐ □ Lead-Free☐ □ Lead-Fr		☐ Ultralight Lead-Free☐ Lead-Free	
	☐ Lightweight Lead☐ Standard Lead☐		☐ Lightweight Lead☐ Standard Lead☐	
Color	Color #		Color #	
C 5.5.			Color Name	
Sizing	Vest/Reverse Vest □ S □ M □ L □ XL □ Perfect Fit			
	Kilt □ S □ M □ L □ XL □ Perfect Fit For Perfect Fit Coat □ S □ M □ L □ XL □ Perfect Fit Complete sizing		ect Fit Complete sizing	
	All other aprons □S □M □L □XL □XXL* □ Perfect Fit chart on back			
	*XXL not available on Vest/Kilt, Reverse Vest/	/Kilt, and C	Coat aprons. Use Perfect Fit sizing on the next page.	
Monogram (\$15.00 ea) Name, department, initials, etc.	☐ Yes ☐ No		☐ Yes ☐ No	
Lettering Style	□ Block □ ALL CAPS □ \(\int \cript \)		□ Block □ ALL CAPS □ Script	
Monogram: Line 1 Please print clearly.	Max 16 characters, including spaces and punctuation.		Max 10 characters including spaces and punctuation.	
Monogram: Line 2 Please print clearly.	Max 16 characters, including spaces and punctuation.		N/A	
			Order Form continued on back	

Perfect Fit[™] Sizing—for tailored aprons

When being measured, stand tall with arms down and feet together.

Front Protection Aprons Measure from sternal notch (center of neckline) to hem.

Front Protection Apron Measurements

- · Quick Drop Basic, Quick Drop Adjustable, Back Aid, Tie Apron, Weight Reliever, and Flex Weight Reliever aprons
- Measure length of apron from the sternal notch (center of neckline) to the hem (suggest 1" above the knee). Adjust according to personal preference.
- Measure chest, waist, and hips. Record here:

Chest _			
Waist _			
Hips			
Length			

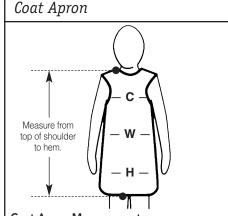
AliMed use only: #

Vest/Reverse Vest and Kilt Vest/Reverse Vest Measure from top of shoulder to top of kilt. 3" will be Kilt added for overlap.¥... Measure from top of kilt to hem.

Vest/Reverse Vest and Kilt Measurements

- Try to find a kilt for comparison. Put it on where you want the top of the kilt to be. This may or may not be your natural waist. Measure from top of shoulder to top of kilt, following contours of the body (over chest). You will be prompted to add 3" so vest overlaps kilt. Measure from top of kilt to hem (typically 1" above knee). Adjust to personal preference.
- Measure chest, waist, and hips. **Record here**:

Measured Vest Length _			
Vest overlap	+ 3"		
Vaist			
lips			
otal Vest		Kilt	



Coat Apron Measurements

- Measure length of apron from top of shoulder to hem (suggest 1" above the knee). Be sure to follow the contour of the body (over chest). If you want your hem longer or shorter, adjust accordingly.
- Measure chest, waist, and hips. Record here:

Chest		
Waist		
Hips _		_

Length

Price

Questions? Call 888.625.4633

Fax completed two-page order form to 800.437.2966.

Additional forms available at AliMed.com/radiation

	Additional forms dvallable at Alliveacon, fu		
Notes	Item		
	Apron		
	Thyroid Shield		
	Sales Tax*		
	Shipping (Please allow 15 business days for shipment.)		
	Total		
	Sales are not final until approved by AliMed.		
Note: Personalized and Perfect Fit Aprons and Thyroid Shields are not returnable.	*Tax applies to all orders shipped in MA, MI, SC, SD, and WA. If you are tax ward a copy of your tax-exempt or resale certificate. If your facility is not in		

-exempt, please for-MA, MI, SC, SD, or WA please submit any use tax directly to your state.