

# Custom-Fit Wetsuit Form

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The more accurate the information we have about you, your measurements, past experiences and requirements, the easier it is for us to give you 100% fit satisfaction now and in the future. Do NOT measure yourself. Have someone else run the tape around you. Measure accurately to the nearest cm. Keep the tape tight.

Customer Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Wetsuit Style/Thickness: \_\_\_\_\_ Wetsuit to be used for? \_\_\_\_\_

What standard size wetsuit/clothing do you fit best? \_\_\_\_\_

Comments about standard size/fit: \_\_\_\_\_

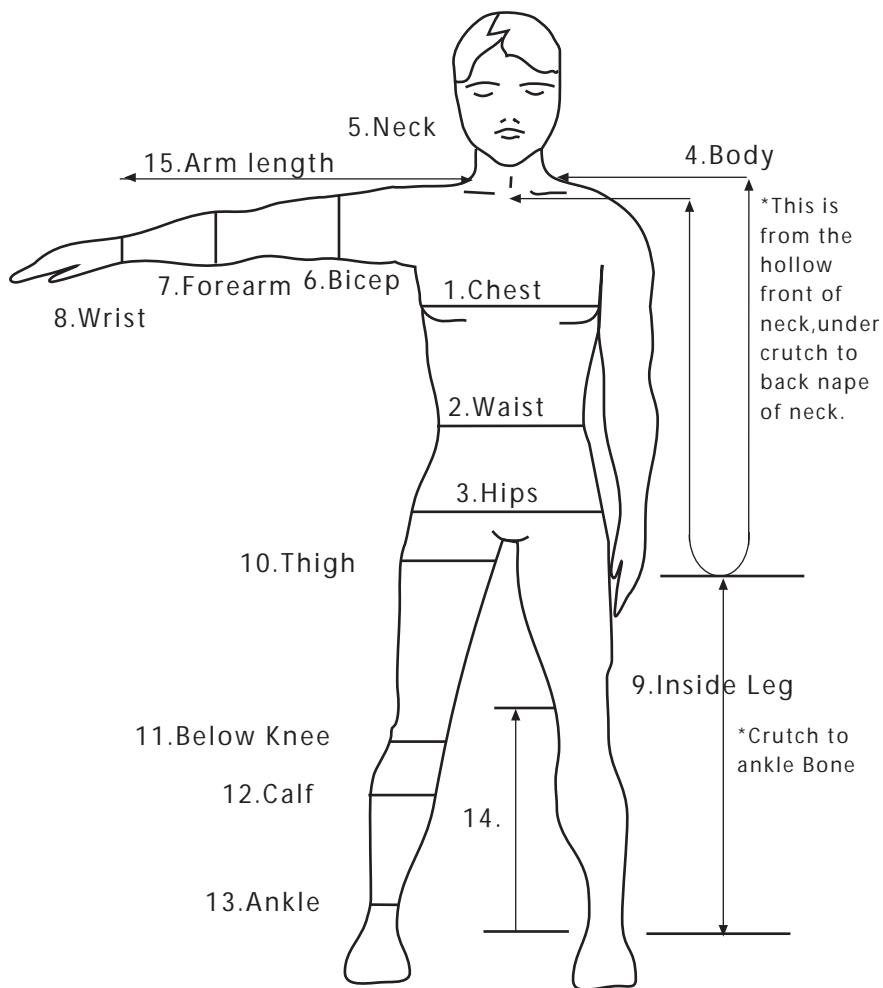
What previous wetsuits have you used? Size/Brand?Model \_\_\_\_\_

What firmness of fit do you prefer? \_\_\_\_\_

What water temperatures are you in? \_\_\_\_\_

Wetsuit for: \_\_\_\_\_ M/F? Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

- |  |                      |
|--|----------------------|
| 1. Chest   | <input type="text"/> |
| 2. Waist   | <input type="text"/> |
| 3. Hips  | <input type="text"/> |
| 4. Body (tricky one!)                                | <input type="text"/> |
| 5. Neck  | <input type="text"/> |
| 6. Bicep   | <input type="text"/> |
| 7. Forearm   | <input type="text"/> |
| 8. Wrist   | <input type="text"/> |
| 9. Inside leg  | <input type="text"/> |
| 10. Thigh  | <input type="text"/> |
| 11. Below knee                                       | <input type="text"/> |
| 12. Calf   | <input type="text"/> |
| 13. Ankle  | <input type="text"/> |
| 14. Top of knee cap to the ankle bone                | <input type="text"/> |
| 15. Arm length from base of neck to wrist. Arm out.  | <input type="text"/> |
| 16. Arm length from base of neck to wrist. Arm down. | <input type="text"/> |
| 17. Above knee                                       | <input type="text"/> |
| 18. Around head at eye brow level.                   | <input type="text"/> |
| 19. Around torso and arms - 5cm down from shoulders. | <input type="text"/> |



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## Your Body Shape Characteristics

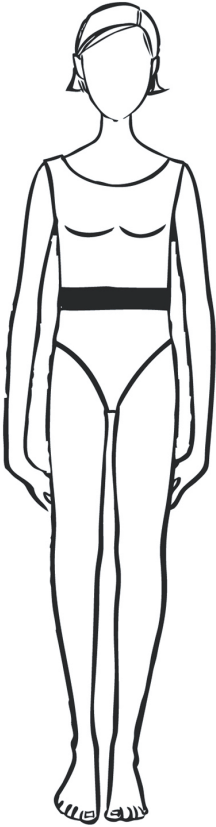


Figure 1



Figure 2

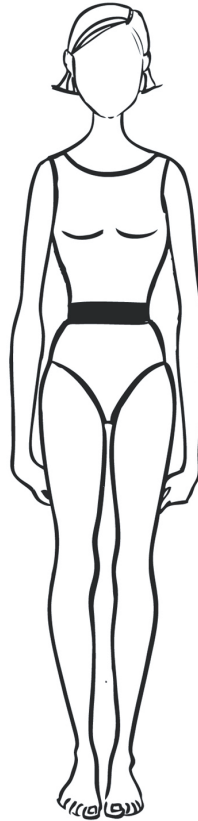


Figure 3

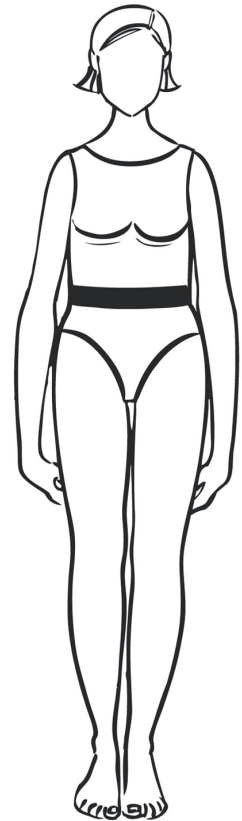


Figure 4

Tick the body shape above which most closely resembles your own:

Tick any of the following options appropriate to your shape:

- |                                       |   |  |   |
|---------------------------------------|---|--|---|
| <input type="checkbox"/> Long neck    | <input type="checkbox"/> Narrow shoulders   | <input type="checkbox"/> Full bust           | <input type="checkbox"/> Long torso             |
| <input type="checkbox"/> Short neck   | <input type="checkbox"/> Broad shoulders    | <input type="checkbox"/> Wide ribcage        | <input type="checkbox"/> High waist/short torso |
| <input type="checkbox"/> Thick neck   | <input type="checkbox"/> Sloping shoulders  | <input type="checkbox"/> Little/no waistline | <input type="checkbox"/> Full hips/thighs       |
| <input type="checkbox"/> Chicken legs | <input type="checkbox"/> Flat bottom        |  |   |
| <input type="checkbox"/> Long legs    | <input type="checkbox"/> Full thighs        |  |   |
| <input type="checkbox"/> Short legs   | <input type="checkbox"/> Full calves/ankles |  |   |
| <input type="checkbox"/> Other.....   |   |  |   |

**NOTE:** uploading a photo of you in tight fitting clothing can also help with sizing