Perfect Wave - Custom order form

Customer: _____

address: _____

City: _____ State: WA zip: _____

Phone: _____

Email: _____

Deposit: _____

Other Note: _____

_____

Shaped by: _____

DECRIPTION:

Shape _____

Length _____

Nose _____

Width _____

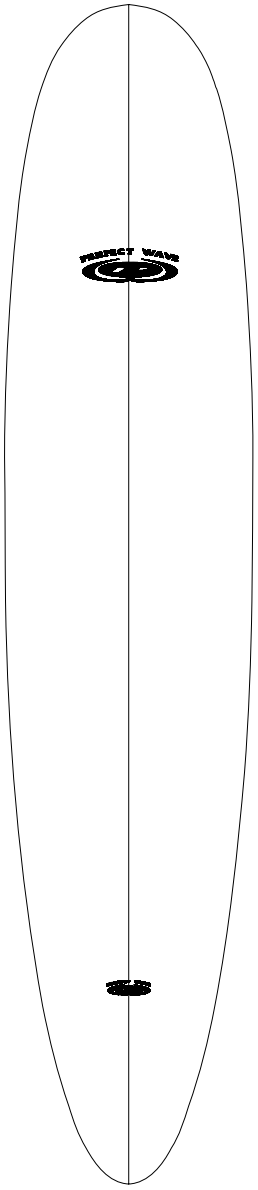
Tail _____

Thickness _____

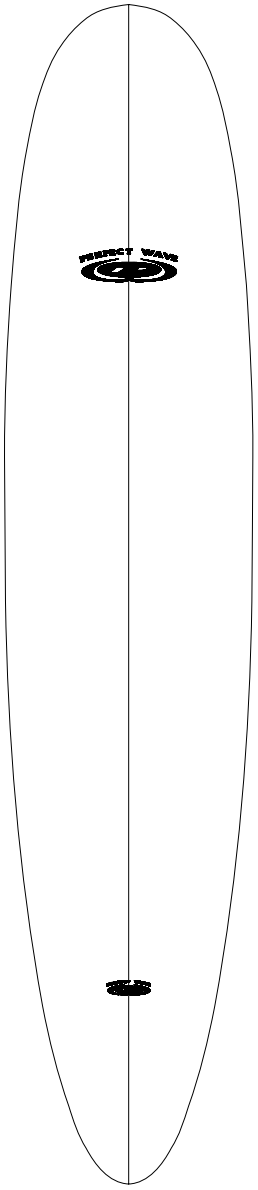
Fin Specification _____

Other _____

Finish _____



FRONT



BACK

Color - Design

Details _____

_____

_____

_____

_____

Perfect Wave

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