

Measured By: _____

GENDER	HEIGHT	WEIGHT	CUP WOMEN CUP SIZE
US SHOE SIZE	* SHOE CIRCUMFERENCE	* NECK AT CENTER	Neck NECK AT BASE
* NECK TO NIPPLE	H1 CHEST AT NIPPLES	H2 UPPER CHEST	H3 LOWER CHEST
* BACK TO ARMPIT	* BACK CHEST	I WAIST	X1 NECK TO WAIST, FRONT
* NECK TO WAIST, BACK	J1 UPPER HIP	J2 LOWER HIP AND BUTT	K1 TOP OF THIGH
K2 MID-THIGH	L1 ABOVE KNEE, 90 DEG.	L2 ABOVE KNEE, STRAIGHT	L3 MID-KNEE, STRAIGHT
O CALF	P1 UPPER ANKLE	P2 ANKLE BONE	D SHOULDERS
C UPPER ARM	B LOWER ARM	A1 NECK TO ELBOW	A2 NECK TO WRIST
A3 FRONT OF ARM	E1 SHOULDER JOINT	E2 BICEP	E3 ELBOW, STRAIGHT
E4 ELBOW, BENT	F FOREARM	G WRIST	Z* NEW TORSO
* CROTCH LENGTH	* NECK TO SEAT, BACK	* WAIST TO FLOOR, OUTSE...	M* NEW CROTCH TO KNEE
N* NEW INSEAM	Pit Special		

Name: _____
Date: _____

Email: _____
Phone: _____



Please DO NOT MEASURE YOURSELF

Reference the 2024 Measurements Guide

Use this section for notes and special requests