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Kiddythotics & Juniors Order Sheet

Account #: _____ - _____ - _____ Date: _____ PO #: _____

Buyer: _____ Company Name: _____

Ship to: _____

Street / Suite

City

State

Zip

Phone #

Fax #

Email

Billing Address If Different: _____

Street / Suite

City

State

Zip

Phone #

Fax #

Email

	Size	Quantity
Kiddythotics	Shoe Size	
Small	Child 1-2	_____
Medium	Child 3-5	_____
Large	Child 6-8	_____
X-Large	Child 9-11	_____
	Total Quantity:	_____
Juniors	Shoe Size	
Small	Adult m 1-2 / w 3-4	_____
Medium	Adult m 2-3 / w 4-5	_____
Large	Adult m 3-5 / w 5-7	_____
X-Large	Adult m 5-6 / w 7-8	_____
	Total Quantity:	_____