CUSTOM APRON WORKSHEET

Order Numer: _____ Quantity: _____ Date: _____

Company: _____ Phone Number: _____

Contact Name: _____ Email Address: _____

Department: _____ Completed By: _____

APRON / VEST

Stock Number: _____ Color Number: _____

Modification to arm opening: Enter PLUS or MINUS Inches: PLUS: _____ MINUS: _____

Modification to shoulder: Enter PLUS or MINUS Inches: PLUS: _____ MINUS: _____

Modification to neck opening: Enter PLUS or MINUS Inches: PLUS: _____ MINUS: _____

Modification to length: Enter PLUS or MINUS Inches: PLUS: _____ MINUS: _____

Modification to width: Enter PLUS or MINUS Inches: PLUS: _____ MINUS: _____

SKIRT ONLY (if any)

Stock Number: _____ Color Number: _____

Modification to skirt length: Enter PLUS or MINUS Inches: PLUS: _____ MINUS: _____

Modification to skirt width: Enter PLUS or MINUS Inches: PLUS: _____ MINUS: _____

ADDITIONAL INFORMATION

Pocket: Pocket Location: _____ ❑ No Pocket

Thyroid Collar Tether:

NOTE: For 75070 only. Use this section if thyroid collar is NOT standard with apron. Thyroid collar sold separately.

Tether Location: _____

Type of Tether: ❑ Clip On ❑ Sewn On

Extra Back Strap: ❑ Yes (Part Number: 62001 Ordered Separately)

EMBROIDERY (Ordered Separately)

Line 1:

Embroidery to read: _____

Location of Embroidery: _____

Thread Color: Standard: _____ Special: _____

Special Instructions: _____

Line 2:

Embroidery to read: _____

Location of Embroidery: _____

Thread Color: Standard: _____ Special: _____

Special Instructions: _____

Additional Instructions: _____