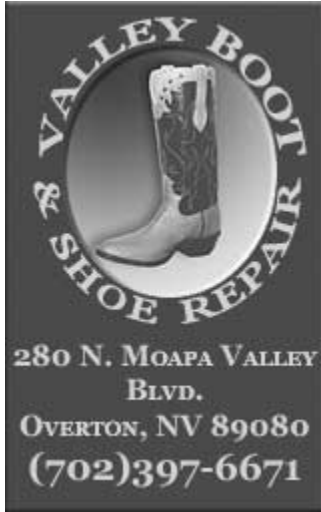


Order No: _____
 Date Received: _____



Custom Chaps Order

Name: _____
 Address: _____
 Phone: _____ e-mail: _____

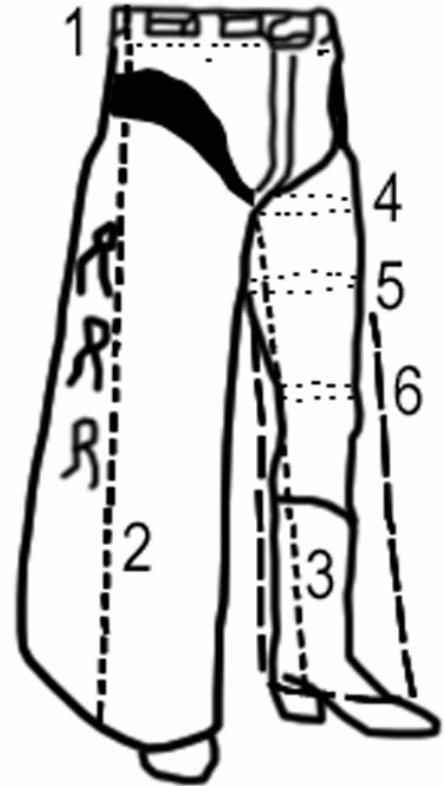
Full payment is required before order will be shipped

Chaps	\$ _____	7.25% tax*	+\$ _____
Extras	+\$ _____	Shipping	+\$ _____
Subtotal	\$ _____	Total	\$ _____

* Nevada residents only

Measurement Information: Wear your boots when taking measurements

- | | |
|---|--|
| 1. Waist - measure around your waist at the position where the chap belt will be worn. | |
| 2. Outseam – Measure from the top of the chap belt to the bottom of the chaps leg. | |
| 3. Inseam – measure from the crotch to the bottom of the chaps. | |
| 4. Upper Thigh – measure the circumference of the largest part of your thigh. | |
| 5. Middle Thigh – measure the circumference of your thigh at the mid point between the crotch and knee. | |
| 6. Above Knee – measure your thigh circumference 1” above your knee. | |
| 7. Calf – measure the circumference of the largest part of your calf. | |



How much do you weigh?	How tall are you?
------------------------	-------------------

Order No: _____
Date Received: _____

Materials and Style Information:	
Leather Type (check one): <input type="checkbox"/> Smooth-out <input type="checkbox"/> Ruff-out <input type="checkbox"/> Top Grain <input type="checkbox"/> Oil Tanned	
Leather Color:	
Style:	
Inlay: Sketch initials or brand in the space at right.	
Add \$1.50 for each initial or symbol in brand on each leg.	
NO REFUNDS OR EXCHANGES ON PERSONALIZED ITEMS	

Payment Information:

I hereby authorize the above order and fully understand that the product must be paid in full before it will be released to me. An additional \$10 will be charged for any changes or modifications made after the order is placed.

Check: _____
Visa: _____ MasterCard: _____ Card Number: _____
Expiration Date: _____
Authorized Amount: _____

Credit Card Authorization Signature: _____

(we cannot process your credit card order without an authorization signature)