



SUIT ORDER FORM

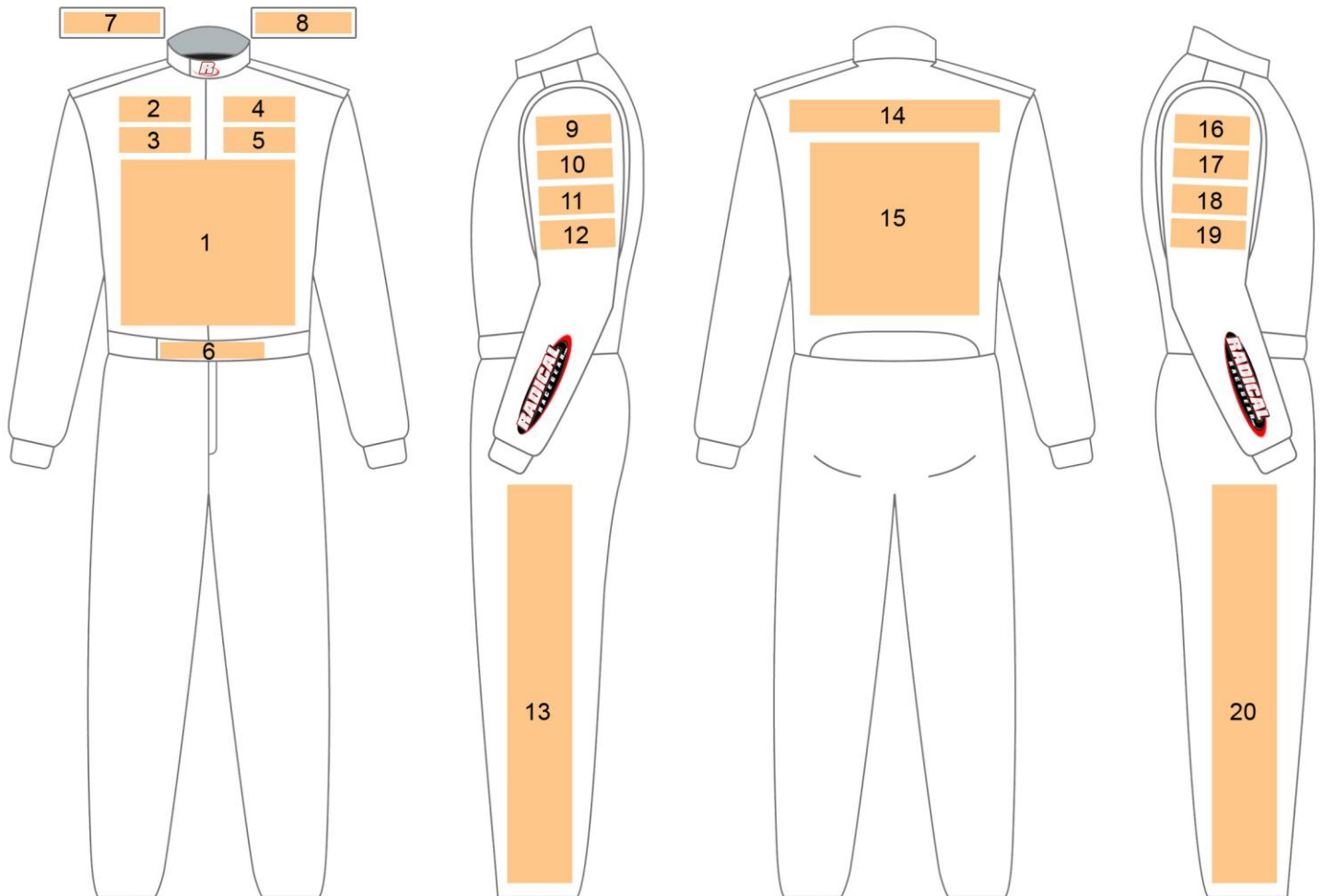
Contact Name: _____ Driver Name: _____

Address: _____

Phone Number: _____ Email: _____

- 1) _____ FRONT CHEST
- 2) _____ TOP RIGHT CHEST
- 3) _____ BOTTOM RIGHT CHEST
- 4) _____ TOP LEFT CHEST
- 5) _____ BOTTOM LEFT CHEST
- 6) _____ BELT
- 7) _____ RIGHT EPAULETTE
- 8) _____ LEFT EPAULETTE
- 9) _____ LEFT ARM #1
- 10) _____ LEFT ARM #2

- 11) _____ LEFT ARM #3
- 12) _____ LEFT ARM #4
- 13) _____ LEFT LEG
- 14) _____ TOP BACK
- 15) _____ BACK
- 16) _____ RIGHT ARM #1
- 17) _____ RIGHT ARM #2
- 18) _____ RIGHT ARM #3
- 19) _____ RIGHT ARM #4
- 20) _____ RIGHT LEG



Note: The Radical Race Gear logo color will be changed to match the colors of the suit.



* USE A CLOTH MEASURING TAPE
* DO NOT MEASURE YOURSELF

I agree that all information provided is accurate and request my suit be made to these measurements.

***Radical is NOT responsible for any incorrect measurements.

Name: _____

Address: _____

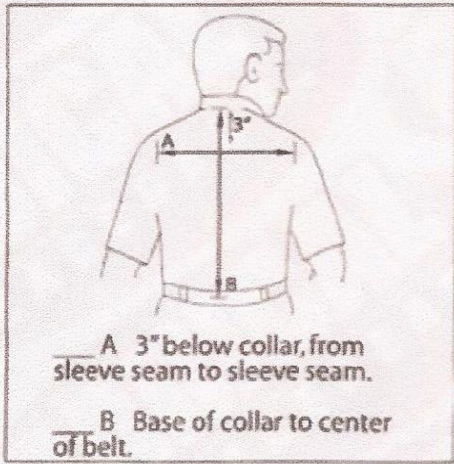
Phone: _____

Email: _____

height _____ weight _____

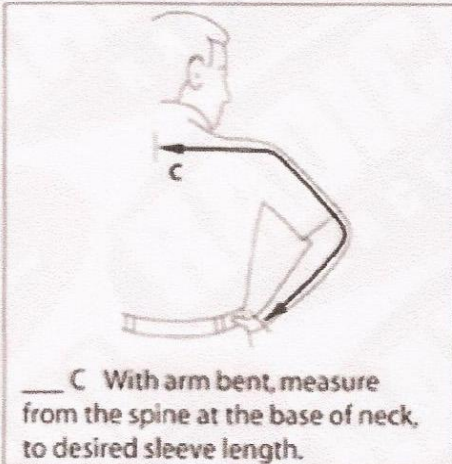
male _____ female _____

regular _____ loose _____

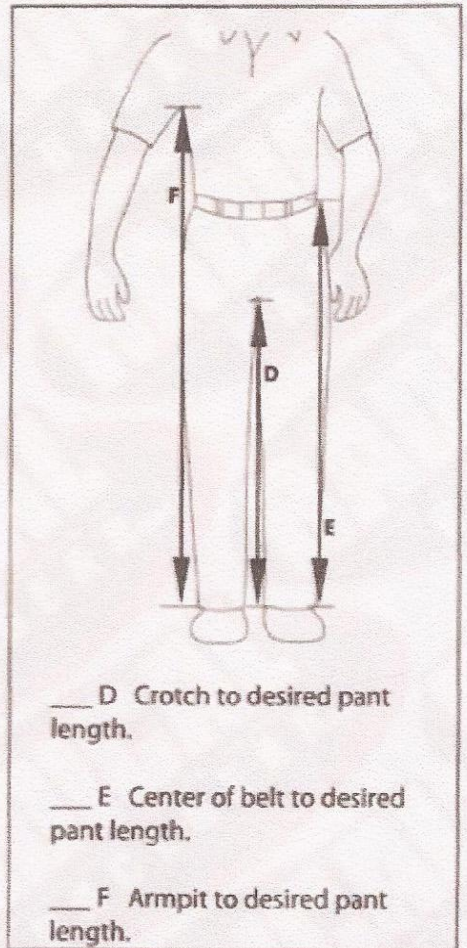


___ A 3" below collar, from sleeve seam to sleeve seam.

___ B Base of collar to center of belt.



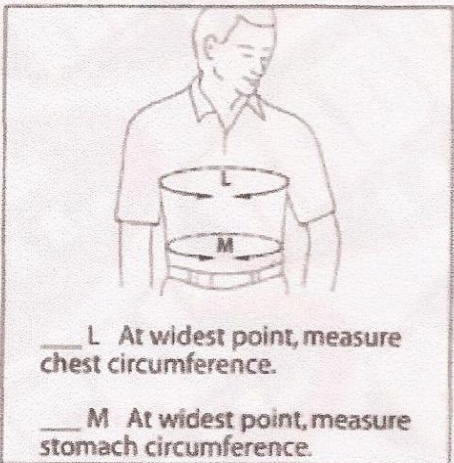
___ C With arm bent, measure from the spine at the base of neck, to desired sleeve length.



___ D Crotch to desired pant length.

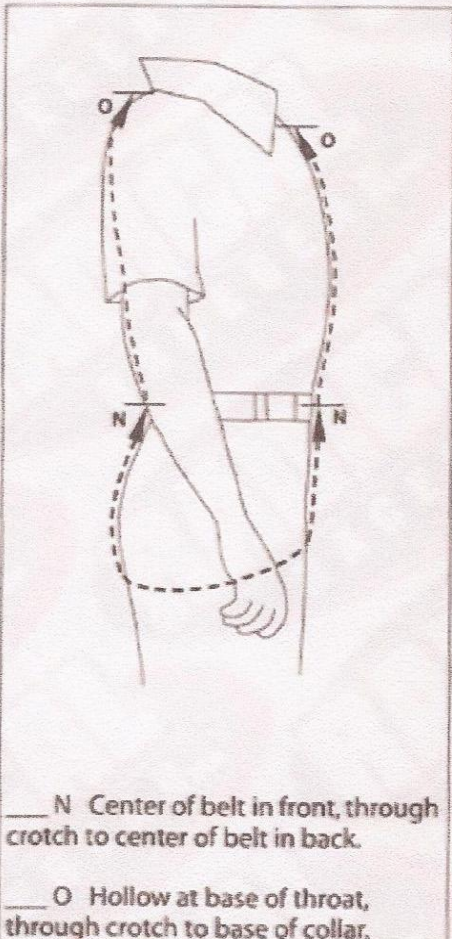
___ E Center of belt to desired pant length.

___ F Armpit to desired pant length.



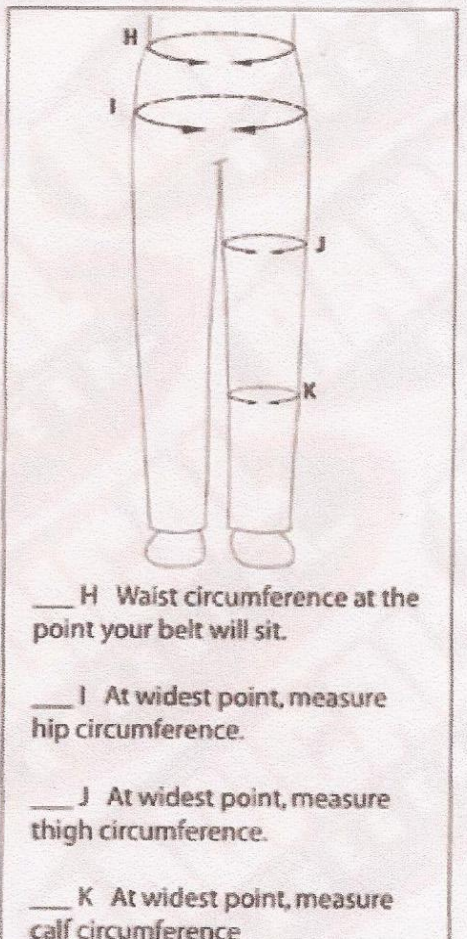
___ L At widest point, measure chest circumference.

___ M At widest point, measure stomach circumference.



___ N Center of belt in front, through crotch to center of belt in back.

___ O Hollow at base of throat, through crotch to base of collar.

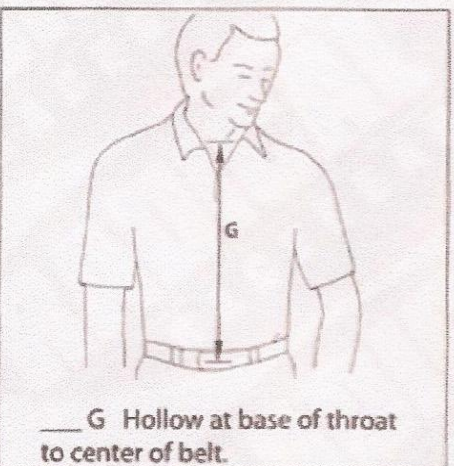


___ H Waist circumference at the point your belt will sit.

___ I At widest point, measure hip circumference.

___ J At widest point, measure thigh circumference.

___ K At widest point, measure calf circumference



___ G Hollow at base of throat to center of belt.