

Name: _____

Top Color _____

Bottom Color _____

Phone # _____

Competitor Yes No

Weight _____

Exerience _____

Shaper _____

Length _____

Nose _____

Width _____

Tail Width _____

Thickness _____

Channels _____

Tail Shape _____

Fin Design _____

Blank _____

Glass Job _____

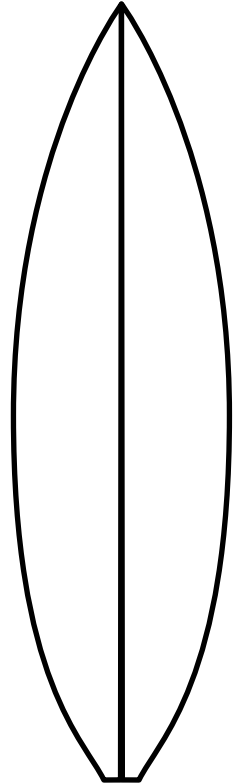
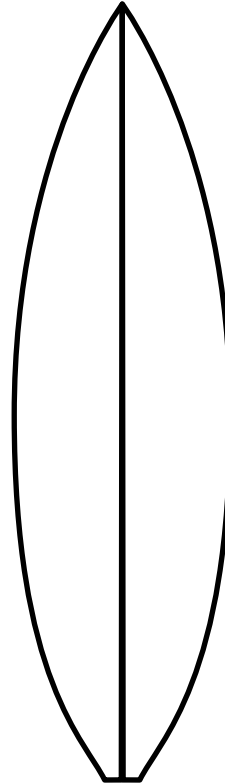
Decals _____

Special Instructions

Additional Information

Top

Bottom



Airbrush

Charge _____

Board# _____

Customer Signature