

FAX OR E-MAIL COMPLETED FORMS

Fax 866.868.1890 | E-mail orders@surestep.net | Phone 877.462.0711 *Orders cannot be processed if indicated fields are left blank

Billing Address	DATIENT (IF ADDI ICADI E)			BILLING / CLUBBING			
Patient ID	PATIENT (IF APPLICABLE)			BILLING / SHIPPING			
Age (inywamz)	Date			Billing Address			
Weight	Patient ID						
Shipping address same as billing	Age (in years)			*City			
Shipping Address *Name Contact Name Cotact Name Fax ST/Prov St/Prov Zip/Postal Code Po# CUSTOM CUSTOM Band width is determined by leg length. If leg length exceeds 90°, a 2° band will be used, otherwise band width is \$1. Measurement of Calife. Maist length \$6° Leg length 106° Band width 2° Pediatric (Patient <5 ft.) Waist length \$0° Leg length 90° Band width 1° Belge Circ of Calf: Waist to KC: Leg Length Deformity: Waist to KC: Leg Length 90° Band width 1° Black Waist Circ: Color: White Note: Custom DeRotation Straps cannot be returned. The return policy only applies to Custom Fit DeRotation straps. FedEx SHIPPING OPTIONS Ground* S10.00 Priority Overnight* 10:30 a.m. next business day	Weight	☐ Male ☐ Female		*ST/Prov	*Zip/Postal Code		
**Name	Dx	Need by da	ate	☐ Shipping address same as billing			
Contact Name Phone Fax ST/Prov Zip/Postal Code CUSTOM CUSTOM SIZE QTY COLOR Adult (Patient >5 ft.) White Haist Height Height Sort Height	COMPANY			Shipping Address			
Phone Fax ST/Prov Zip/Postal Code E-mail PO# **CUSTOM FIT Band width is determined by leg length. If leg length exceeds 90°, a 2" band will be used, otherwise band width is 1". **Adult (Patient > 5 ft.) White Waist length 56" Beige Circ of Calf: **Band width 2" Black Circ of Calf: **Waist length 50" Beige Circ of Calf: **Waist length 30" Black Waist to KC: **Waist length 30" Black Color: White Black **Trial Set Pediatric Adult Available in White Pediatric Adult Priority Overnight** 10:30 a.m. next business day	*Name						
CUSTOM FIT SIZE QTY COLOR Adult (Patient >5 ft.) Waist length 56" Leg length 106" Band width 16 determined by leg length, if leg length exceeds 90", 32" band will be used, otherwise band width is 1". MEASUREMENTS LEFT RIGHT Circ at Mid Thigh: Circ of Calf: KC to Sole: Pediatric (Patient <5 ft.) Waist length 30" Leg length 130" Leg length 90" Band width 1" Beige Circ of Calf: Waist to KC: Leg Length Deformity: Waist Circ: Color: Note: Custom DeRotation Straps cannot be returned. The return policy only applies to Custom Fit DeRotation straps. FedEx SHIPPING OPTIONS Ground* Signary A.M. 10:30 a.m. or noon 2" business day	Contact Name			City			
CUSTOM FIT SIZE QTY COLOR Adult (Patient >5 ft.) White Beige Leg length 106" Band width 15" MEASUREMENTS LEFT RIGHT Circ at Mid Thigh: Circ of Calf: Waist length 30" Leg length 90" Band width 1" Beige Leg Length Poor Band width 1" White Waist Circ: Color: White Waist Circ: Color: White Measure DeRotation Straps cannot be returned. The return policy only applies to Custom Pit DeRotation straps. FedEx SHIPPING OPTIONS Ground* Strong Am. 10:30 a.m. or noon 2" business day	*Phone	Fax		ST/Prov	Zip/Postal Code		
SIZE QTY COLOR Adult (Patient > 5 ft.) Waist length 56" Leg length 106" Band width? Pediatric (Patient < 5 ft.) White Waist length 30" Leg length 90" Band width? Black Available in White Pediatric Adult Available in White FedEx SHIPPING OPTIONS Ground®	E-mail			PO#			
Adult (Patient >5 ft.) White Beige Circ at Mid Thigh: Circ of Calf: Beige Waist length 30° Black KC to Sole: Pediatric (Patient <5 ft.) White Waist to KC: Waist length 30° Beige Leg Length Deformity: Beige Leg Length Deformity: Leg Length Deformity: Beige Leg Length Deformity: Black Trial Set Available in White Note: Custom DeRotation Straps cannot be returned. The return policy only applies to Custom Fit DeRotation straps. FedEx SHIPPING OPTIONS Ground®				Band width is determined by leg length. If leg length exceeds 90",			
Circ at Mid Thigh: Circ at Mid Thigh: Circ of Calf:	SIZE	QII	COLOR	MEASUREMENTS	LEFT	RIGHT	
Waist length 36' Leg length 106" Band width 2" Pediatric (Patient <5 ft.) Waist length 30" Leg length 90" Band width 1" Black Waist Circ: Color: Trial Set Pediatric Adult Pediatric Adult Available in White Note: Custom DeRotation Straps cannot be returned. The return policy only applies to Custom Fit DeRotation straps. FedEx SHIPPING OPTIONS Strong A.M. 10:30 a.m. or noon 2"d business day			☐ White	Circ at Mid Thigh:			
Black KC to Sole:	Leg length 106"		□ Beige	-			
Pediatric (Patient < 5 ft.) Waist length 30" Leg length 90" Band width 1" Beige Color: White Note: Custom DeRotation Straps cannot be returned. The return policy only applies to Custom Fit DeRotation straps. FedEx SHIPPING OPTIONS Ground®			☐ Black	Circ of Calf:			
Waist to KC: Beige Leg Length Deformity:				KC to Sole:			
Leg Length Deformity: Black Waist Circ: Color: White Black Waist Circ:			☐ White	Waist to KC:			
Black Waist Circ: Color:	Leg length 90"		□ Beige	Leg Length Deformity:			
Trial Set			☐ Black	Waist Circ:			
Pediatric Adult AVailable in Wnite Note: Custom DeRotation Straps cannot be returned. The return policy only applies to Custom Fit DeRotation straps. FedEx SHIPPING OPTIONS \$10.00 Priority Overnight* \$10:30 a.m. next business day				Color:	☐ White	□ Black	
Ground®			Available in White				
□ 2 Day® A.M. 10:30 a.m. or noon 2 nd business day			FedEx SHIPPI	NG OPTIONS			
PAYMENT INFORMATION	☐ Ground®\$10.00			☐ Priority Overnight® <i>10:30 a.m. next business day</i> \$55.00			
Those without an existing account must provide credit card information to place an order. Please call a Surestep Customer Service Representative with any questions you may have regarding your order. Credit Card Number Expiration Date Security Code Discover Visa MasterCard American Express Month Year	☐ 2 Day [®] A.M. <i>10:30 a.m. or no</i>	on 2 nd busine	ess day\$30.00	☐ First Overnight® 8:00 a.m. next business day\$100.00			
Signature (as shown on credit card) Date	Those without an existing acc Representative with any ques Credit Card Number	count must tions you m	provide credit card inform nay have regarding your or	Expiration Date Security	·	mer Service	
	Signature (as shown on credit c	ard)		Date			

RETURN POLICY Returns will be accepted for this product given that it remains in its original condition and is received within 10 days of the purchase date. Modified or damaged products will not be accepted. Products will be inspected upon return. To receive full reimbursement for your purchase, please complete the return form included in the packaging and follow the instructions indicated.