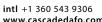


Cascade Dafo, Inc.

1360 Sunset Ave, Ferndale, WA 98248

ph 800.848.7332 | intl +1 360 543 9306 fax 855.543.0092 | www.cascadedafo.com





	•						
PATIE	NT			PRAC	TITIONER		
Last Name	e:			Name:			Title:
First Name	e:			Email:			
DO	В:	Bilate	ral Left	Right Phone:			
BILLII	N G	F	USH ORDER	R(\$) SHIP	PING		Same as Billing
Name:				Name	:		
Address:				Facility	:		
				Address	:		
City:		State:	Zip:				
PO#:				City	:	State:	Zip:
DIREC	T PURC	HASE PAYMENT OP1	TIONS				
Exact Name on Card:			Credit C	ard #:			
Cardholder's Phone:				Exp.	Date:		
Cardholder's Email:				V-(Code:		
		NOTE: If no options are se	elected vous	will receive the	Fast Fit Stan		on)
		TE. II TIO OPTIONS are st	rected, you t	viii receive tire	. rust rit Stari	Jaara (See mastrati	OT 17.
POSIT	ION OF	FUNCTION					
LENGTH	 :						
Specify	:	4.00-12.25 (0.2 Choose length that will a	5 inch increments) llow for 0.25-0.5 inch	growth			
TOE PLA	ATE:						
Contours Flatten				•	One Layer of Foam	/	
STABI	LITY					/	
	ZATION:						
None	Midfoo	t (\$)				Sc	emi-rigid Partial Heel Cup

ADDITIONAL INSTRUCTIONS

Toe Plate Contour Under Toes 2-5

One Layer of Plastic